



# MEDICAL WRITING

THE TECHNIC AND THE ART

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Editor, *The Journal of the  
American Medical Association*

with the assistance of

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SECOND EDITION

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# Preface

This book on medical writing represents the gradual evolution of theory and practice associated with the conduct of the editorial department of the American Medical Association for some 35 years. When Dr. George H. Simmons became editor of *The Journal*, he began to accumulate various memorandums concerned with the technic of preparation of papers for publication which had been sent to the manuscript editors and his assistants. Later I assisted him in preparing a manuscript on the "Art and Practice of Medical Writing." The present volume constitutes an extensive revision of various previous editions together with much new material. The new material has been developed largely as the result of the handling of thousands of manuscripts for *The Journal of the American Medical Association* and the special periodicals published by the Association.

When manuscripts are accepted for publication in any of the periodicals published by the American Medical Association, they pass through the manuscript editing department. Here the sizes of type to be used are indicated, the style of the diction is made to conform to the rules of the American Medical Association Press. Most of the examples which appear in the pages that follow are selected from actual manuscripts received by the Association.

The help of the following employees of the American Medical Association, whose suggestions also are incorporated in this book, is acknowledged with appreciation: Marjorie Hutchins Moore, librarian, Mr. F. K. Bryant, Dr. Austin Smith, Secretary of the Council on Pharmacy and Chemistry, and Dr. Howard Fox, editor emeritus of the *Archives of Dermatology and Syphilology*, who assisted in the preparation of the section on Latin terminology.

Grateful acknowledgment is made also to Mr William Brown Mc-  
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revision of the chapters on "Preparation of the Manuscript" and  
"Proofreading "

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*Chicago*  
*June 1948*

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# Introduction

Increasing organization in the field of medicine, as in every other field of human endeavor, has introduced advancement in the production of contributions to medical literature. Far too often, however, there still are physicians who prepare their contributions with a striving and agony and delay comparable to the delivery of human progeny by one untutored in the possible refinements associated with that performance. Many times the physician, asked to prepare for a local medical society a simple statement constituting a review of available knowledge, fails to inform himself concerning the innumerable agencies prepared to assist him in that simple task. He is likely to seat himself in his office or in his den at home, to surround himself with a liberal quantity of textbooks of more or less recent vintage and with periodicals selected at random, and then to endeavor to collate this material in a single evening so that ultimately it may resemble something of usefulness to the physicians on whom it will be inflicted. The first information that this physician should possess is the importance of the preparation of a systematic, orderly, scientific outline as the first step in the preparation of a manuscript on any subject. Even the elementary courses in English composition now teach the significance of having an introduction, a body, a summary and a conclusion to any type of scientific essay.

Professional writers in every field of literature have come to realize the importance of preparation of a manuscript for the publication to which it is meant to be sent. Some periodicals limit themselves to articles of 1,500 words, others are capable of handling large monographic presentations. *The Journal of the American Medical Association*, for instance, endeavors to limit practically all scientific contributions to six pages, or not more than 6,000 words (preferably to articles that are much shorter). In the instance of articles prepared for a specific purpose, greater latitude is granted. Obviously the physician who is



purely on the basis of mental gymnastics, claim that they have solved problems. Unfortunately, some physicians will discuss scientific questions concerning the fundamental and elementary principles of which they are entirely ignorant. Such papers usually are returned with the suggestion, circumspectly phrased, that an ounce of fact is worth a ton of theory. Every physician, of course, has the right to express opinions, to advance theories and to make known his discoveries. But the reader also has his rights, and the editor must regard these rights as paramount. The reader depends on the editor not to publish fiction for fact or fallacies which he—the reader—is not qualified to detect. The editor is supposed to have a knowledge of the author and his dependability that the reader cannot have.

Again and again a paper is received announcing the discovery of a bacterial causative agent for an apparently noninfectious disease. If the author is a man of well earned national repute and a frequent contributor to medical literature, consideration must be given to the publication. But far more harm is done in the publication of fallacious matter than in procrastinating with or in rejecting, a dozen papers offering new theories and new evidence which may be of value but which are not convincing.

Often a writer wishes to bring his manuscript personally to the editor and to stand by while the editor reads, with explanations of portions that the editor may not understand. Authors should remember that they cannot personally accompany each copy of the periodical to each subscriber.

**The Medical Society Address.** One of the chief causes of overabundance of medical periodical literature undoubtedly is the publication of papers that were written not for publication but to be read before a medical society. A large percentage of articles in medical journals are of this type. Frequently such articles are based on textbooks or on easily accessible literature and do not contain original observation, new thought or record of experience. They may review a subject in a more or less complete form and thus be useful to read before a society, since they constitute a basis for a general discussion, but they may not be worth publishing. As a rule, they are not so well thought out nor so carefully written as are papers prepared especially

for printing. Thus they do not elevate the tone of periodical literature or add to the knowledge of scientific medicine. The demand of medical societies for contributions to their programs is the only excuse that may be offered for the deficiencies of such manuscripts.

Specialists or consultants from the city frequently are invited by the smaller medical societies to present papers, which in many cases are likely to be better prepared than those of members of the society, whose usual purpose is merely to open a discussion. The visitor is anxious to make a good impression. He thus brings profit not only to others but also to himself. Often, however, such papers may rightly be dubbed "potboilers." They, too, usually are written for reading, not for printing.

Frequently the secretary of a medical society sends a paper to an editor with the statement that it was received enthusiastically by the members of the society, who voted that it be submitted for publication with their approval. The editor finds, to his astonishment, that the paper is ungrammatical, discursive or verbose, or poorly organized, without sequence in argument or in arrangement of the subject. The author's presentation, his inflections and, above all, his personality, were responsible for the success of the manuscript, the audience did not detect any fault and gave him applause and congratulations.

If an author is to be the only speaker, his anxiety will be not as to how briefly he can present his subject but as to how he will fill the time he has been assigned. Brevity, conciseness, the elimination of unnecessary details and the avoidance of branching off into unrelated and irrelevant subjects and of the use of colloquial language will not give him concern. He will consider as appropriate and proper the relating of unimportant incidents in his experience—for instance, a case report, an occasional aside and personal allusions. In this he will be right. But he will not be right if he submits his article for publication without modification. Common courtesy compels his audience to remain and listen until he concludes his address, but if his paper is prolix or rambling it will have few readers. When the paper is published the personal equation does not enter and the courtesy of the listener has vanished.

At least 10 per cent of the manuscripts rejected by *The Journal* have

been returned because they have been prepared for reading before a society and evidently submitted for publication without revision. A manuscript that is fit to read is sometimes fit to print, but a manuscript that is fit to print is always fit to read.

**Length** An occasional reason for the return of a manuscript is its length. Like Einstein's theory as to space and time, however, length in this case is a matter of relativity. A paper of 500 words may be long, one of 5,000 may be short. The primary consideration is whether the material justifies the length. Usually manuscripts are unnecessarily long because of easily avoidable faults in construction, such as rambling, verbosity and diffuseness.

### A STANDARD

Manuscripts, therefore, are rejected by discriminating editors for various reasons relating to the suitability of the material and to its general construction. Of these, by far the most important is the material, if the contribution is of value, other faults are susceptible of correction.

A manuscript should be suited to its audience. One easily intelligible and interesting to biologic chemists may have little appeal to otolaryngologists. The details of a new technic for estimating uric acid will attract few general practitioners, who do not have the apparatus for performing the technic.

As a standard for judging the value of the material embodied in a manuscript, that set for papers presented in the various sections of the Scientific Assembly of the American Medical Association may be significant. This standard provides that papers must (1) contain and establish positively new facts, modes of practice or principles of real value, (2) embody the results of well advised, original researches or (3) present so complete a review of the facts concerning any particular subject as to enable the reader to deduce therefrom legitimate, important conclusions.

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## Style

James Huncker said "Style cannot be taught A good style is direct, plain and simple The writer's keyboard is that humble camel, the dictionary " Quiller Couch said it differently "Style in writing is much the same thing as good manners in other human intercourse "

After many years' experience in editing the *Atlantic Monthly*, Mr Ellery Sedgwick made some comments on style which are worthy of quotation "Style," he said, "varies with every temperament Sometimes it is torrential, sometimes combative Occasionally it is achieved through a certain parsimony in words In a satirical passage understatement always tells "

### FINE, OR FANCY, WRITING

Whenever a writer feels an impulse to perpetrate a piece of exceptionally fancy writing he should obey it but should delete what he has written before sending the manuscript to press "Fine writing" is not especially a fault of medical literature, yet it occurs with amazing frequency Following are examples from manuscripts submitted for publication

The pragmatic verity of this physiological concept of disease is established by its usefulness —with functional integrity our goal the no thoroughfare of unattainable structural integrity leaves us no longer at a therapeutic non plus

The above sounds like an erudite pronouncement but does it mean anything?

But what of the child? Who has championed its rights? Summoned against its will or without its consent into this world of trouble pain sickness and finally death what Rousseau or Voltaire shall sound the tocsin, and call upon the infant muling and puking in the nurse's arms, to demand that its own mother shall give it that lactic fluid that is its primal right Bid it howl like all the heads of Cerberus against being condemned to partake of milk of cerulean hue contaminated by *Bacillus bulgaricus* prescribed by some adolescent and ardent disciple of Aesculapius What Danton or Robespierre shall band together the sansculotte toddlers so that they may not be torn from the kindly face of mother earth washed and dressed and sent to kindergarten where all of their play is so scientifically arranged by followers of Pestalozzi and Froebel

that good fairies are unknown to them and a "primrose beside a mossy bank, is to them but a primrose nothing more." Where they are taught like the clown in Lady Browning's poem, "to pick simples, turning a broad back to the glory of the stars."

The author meant this seriously, for he wished to promote nursing of babies by their mothers. It was part of a presidential address before a serious gathering and apparently was accumulated largely from Bartlett's "Familiar Quotations."

The specificity and mathematical exactness of its effects in given dosages of which Ehrlich dreamed has gone glimmering among the pitfalls of spirochetal individuality and variation in human susceptibility.

Here the error is not so obvious, it lies in the use of words which sound extraordinarily well but which do not apply and therefore are confusing. Note "glimmering" and "pitfalls."

A florid, roseate style, full of polysyllabic, metaphorical phraseology, distracts the reader's attention. Seldom is it necessary in scientific writing to employ other than simple English terms to express an idea or to state a fact. The medical reader is acquainted with technical terms, but advantage should not be taken of this to make the sentence unduly polysyllabic. Particularly bad is the use of literary allusions to give the impression of learning especially when the allusions are incorrect or have no direct relation to the subject discussed. For example:

The neurologist with all of his knowledge of minutest anatomy, was for years like the "man who stood on the bridge at midnight," not dreaming the dreams of a Longfellow but soliloquizing after the manner of the cynic on the vanity of all earthly things when to the voice of the syphilographer first cried from out of the darkness "Fear not, for I am with you always."

The following statement was submitted exactly as here set forth, with the request that it be published as written or returned to its author:

By septaecemia I mean any virulent infection where pathogenic organisms together with their toxins invade the constitution septic blood poison not less no other.

I speak for free and unlimited drainage, as free and unlimited as successful fortification against the savage onrush of the enemy indicates. These drainages should be of gauze soaked in pure iodine. They should be renewed fre-

quently until victory is assured Pure, full strength iodine brought thus to impregnate the infected area, will diffuse itself as will no other remedy except turpentine, which is its only legitimate substitute Thus brings it into close hand-to-hand combat with the invading enemy, they are immediately destroyed and their toxins neutralized Iodine is so far superior to any other remedy in this conflict, that none other need be mentioned It is the Field Marshall, the General Grant of such battles The best of any other remedy save turpentine, it is to iodine in such battles as a popgun is to a machine gun

It was returned!

And here a dermatologist, confronted by a request for an address on a special occasion, took his pen in hand, tore up his books on rhetoric and grammar and spoke freely

When Richet, whose talents were capitalized by the winnings of a Mediterranean gambler instead of by the sanctified swag of a field marshal of industry, discovered the nature of anaphylaxis, he started medical imagination on another flight into the hectic realms of hit or miss The phenomenon he discovered was definite It meant something and still does But the lily has been gilded by countless clumsy brushes, and the ultimate daub is allergy, God save the mark, as interpreted and applied today The metaphors in this paragraph have been mixed intentionally in order to symbolize how confused a simple thing can become when the human mind strikes its stride For a moment let us travel backwards the path of medical history, and note the sign posts First a philosophy based on the humors which colored etiological concepts until the middle ages Then the great intellectual jolt by Harvey, a reveille that bounced Galenism out of its ancestral coma Thereafter a scramble of ideas preeminently the doctrine of the diathesis, gouty in England, darts in France Another jolt, Pasteur, another, Virchow, another, Ehrlich Parasites, cell pathology, immunity! Is it remarkable that the medical world went crazy? And then Richet

And in the train of all these, first a germ for every illness, then a cell change for every nuance of illness, then an antibody in no man's land attempting a truce between the parasite and cell, to the ultimate victory of health then a catchpenny word, catchpenny because a great idea, that of anaphylaxis, was kiwanised out of all recognition by the Rotarian minded in a world wide Gopher Prairie, while the instructed could only sit back in stunned contemplation But a bit of optimism arose in them as they mused with Villon, "where are the snows of yesteryear?"

And these snows, what are they? Humoral pathology in all its classic ingenuousness, the miasma, the mesmeric moon, allopathy, homeopathy, the spleen, black bile, yellow bile, dark blood, phlegm, the diatheses, malaria, idiosyncrasy, susceptibility, hypersusceptibility, all once were dignified in speculative etiology Where are they today? And tomorrow, where will be focal infections, where, allergy? "Non omnis moriar," sang Horace, nor will these

either entirely die, but when they have survived the purgatory of misconstruction, their lambent spirits, resurrected, will lead medicine onward after the fools and opportunists have had their fling

If ever a subject warranted such hyperbole, allergy would, but one's mind and ears have become hypersensitive to hyperbole

Among typical violations of the rules against fine writing are the following usages

"Gentleman" instead of "man "

"Inaugurate" instead of "begin "

"The patient sustained an injury" instead of "The patient was injured "

"Canine" instead of "dog "

### VERBOSITY

Verbosity is a blemish in the writing of most people—one that makes reading tedious, mars diction and wastes space. This fault can be overcome easily, but in most instances not efficiently until after the paper has been written. Unless you have tried it, you will be astonished at the number of words, phrases, clauses, sentences and, occasionally, paragraphs that can be deleted without affecting the meaning. Deletions of unnecessary words always improve grammatical construction and style of expression and facilitate reading with understanding.

Quiller-Couch, in his book entitled "On the Art of Writing,"<sup>1</sup> devoted a chapter to verbiage. Here is one of his illustrations:

A clerk of a Board of Guardians had to record a minute relative to the burial of a pauper. The minute reads:

"In the case of John Jenkins, deceased, the coffin provided was of the usual character."

Sir Arthur pulled the sentence to pieces. It is superfluous to say that Jenkins is deceased; the fact that he needs a coffin is sufficient evidence. "In the case of" is superfluous, for Jenkins did not have a case; he had, and needed, only a coffin. The coffin was not "of the usual character," for coffins have no character. The clerk should have said: "John Jenkins was provided with the usual coffin."

An article by A. G. Macdonell, published in the London *Lancet*,

<sup>1</sup> Quiller-Couch, Arthur. *On the Art of Writing*, New York, G. P. Putnam's Sons, 1916.

complimented Mr Winston Churchill, who in an interval between organizing the defense of the British Empire and winning the war, found time to send a little memorandum to his colleagues in the Government, asking them to alter their style of writing the English language. In his letter Mr Churchill insisted that all official documents and memorandums should be short. He wrote "Let us have an end to such phrases as 'It is also of importance to bear in mind the following considerations,' and again, 'consideration should be given to the possibility of carrying into effect ' "

Mr Macdonell continued, quoting " 'the answer ■ in the affirmative' will now have to give place to the old-fashioned Anglo Saxon word 'yes' The phrase, 'considering all the circumstances, it would probably be correct to answer this question in a contrary fashion,' will have to give place to the old simple 'no' "

"What a lot of beautiful phrases are going to be scrapped because of the Prime Minister," said Mr Macdonell " 'With regard to the question as to whether,' for example. That will have to go. 'In view of all the circumstances arising in and from ' That is another. Then there is, 'While admitting that the opinions expressed in our letter of the 24th ult undoubtedly were expressed in that letter, we cannot admit that those opinions were in any way binding on anyone connected with this department' "

Here are specimens from real life—from manuscripts submitted for publication in *The Journal*

I do not hesitate to say that in my opinion the gland in this case should not have been removed

The first seven words are space takers, the author makes his statement and the reader cares not whether he hesitated or did not hesitate in making it. The shorter sentence, "In this case, in my opinion, the gland should not have been removed" was printed. Possibly "in my opinion" also might have been deleted.

This from another author

It has been a mooted question in the minds of microbiologists whether the gonococcus possesses a capsule



either entirely die, but when they have survived the purgatory of misconstruction, their lambent spirits, resurrected, will lead medicine onward after the fools and opportunists have had their fling

If ever a subject warranted such hyperbole, allergy would, but one's mind and ears have become hypersensitive to hyperbole

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# POOR GRAMMAR

The modern physician presumably has had the advantage of education in a university. When, therefore, an editor receives a manuscript from a physician in which sentence after sentence reveals grammatical faults that would disgrace a seventh grade student, he must surmise that the author has failed to give the writing of his article proper attention.

Here are some examples from manuscripts:

In meningococcic meningitis the optic nerve is involved as a perineuritis; there is not a papilloedema in contradistinction to the papilloedema the result of pressure from distention of the optic prolongation of the third ventricle pressing on the chiasmal cystem as occurs in meningitis of pyogenic origin.

In general the larger abscesses had the higher counts, with one exception, 23 days after an unoperated appendicitis with 14,400 white blood cells and 3,000 cc. of pus.

There were four cases of appendicitis, none of which had been operated except for a pelvic abscess in one.

Medulloblastomas develop almost invariably in children taking their origin just over the fourth ventricle.

Scabies is also a frequency with the Negro, for he fails to realize the severity and the laxity of consulting a physician, resulting in rapid and wide dissemination of this highly contagious parasitic skin infection to others, and in many instances the starting of an epidemic.

Her pelvis had been injured by being thrown from a motorcycle.

Williams states that he induced the animals to take the hydrocarbon by licking it off a glass rod.

Here is a specimen of highly confused grammar from a chairman's address before one of the scientific sections of the American Medical Association:

We have had a sister specialized field, that of Ophthalmology. Very few of the older men still practicing but whom earlier in their careers did not embrace both fields, and I am not sure but when after they gravitated to one or the other they were not better men for having at one time applied their knowledge to both. There is something to be said against narrowing one's horizon too much. This may be debatable but there is an economic side that is not to be disputed. There are communities which are entitled to good service but are not large enough to support physicians devoting their attention to only ophthalmology or otolaryngology. Statistical studies are lacking but the

The difference between a mooted question and one that is not mooted is problematic "In the minds of microbiologists" carries the idea that only microbiologists are concerned The sentence was improved by divesting it of verbiage, and when printed it read

It has been a question whether the gonococcus possesses a capsule

The purist would have modified this still more and mentioned the microbiologist, making it read

Microbiologists question whether the gonococcus possesses a capsule

This from an article describing an apparatus

Physicians who have been using radium needles will readily appreciate the difficulties encountered in threading them

"Who have been," "will readily" and "encountered" were deleted, and the sentence revised to read

Physicians who use radium needles realize the difficulty of threading them

The introduction to a case report read

The following case is reported on account of the unusual occurrence of *Ascaris lumbricoides* in an adult of sufficient quantity to cause obstruction of small intestine, necessitating resection of intestine

Miss R. of A———, Ala., referred to me by Dr. M. S. of ———, aged 36, single, admitted to the hospital at Albany, Ala. Nov. 6, 1947, suffering with intense pain in the abdomen in the right hypochondriac region. She was a poorly nourished woman and suffering great shock and presented all the symptoms of an intestinal obstruction.

The first paragraph could be omitted by entitling the paper "*Ascaris lumbricoides* Causing Obstruction of Intestine in an Adult. Report of a Case in Which Resection Was Necessary."

The report contains a large number of unnecessary words, from the point of view both of good writing and of facts necessary to adequate presentation. With the unnecessary words bracketed for omission, the report appears

Miss R. [of A——— Ala. referred to me by Dr. M. S. of ———] aged 36, [single, admitted to the hospital at Albany, Ala.] was seen on Nov. 6, 1947, suffering with [intense] abdominal pain in the right hypochondriac region, [She was a poorly nourished woman and suffering great shock and presented all the symptoms of] apparently due to intestinal obstruction.

Most common among grammatical errors found in articles submitted for publication are the following

**Affect and Effect.** These two words frequently are interchanged "Affect" means *to act on*, "effect," *to bring about*

The following quotations are from an editorial by William H Woglom in *Cancer Research* 2 846 (Dec ) 1942

**Question as to** Fowler calls this an ugly and needless formula

*The question arises as to whether the tumors were caused by the injections* [Wrong ]

*The question arises whether or not the tumors were caused by the injections* [Right ]

**As large, or larger, than** This is a common fallacy A moment's reflection will show that when the little afterthought and its enclosing commas have been deleted, "as large, or larger, than a plum" becomes "as large than a plum," which is manifestly absurd The correct expression is "as large as, or larger than, a plum" This paragraph does not condone the careless habit of comparing the size of a lesion with that of some familiar object Actual dimensions expressed in the metric system, are, of course, preferred

**Different than** The expression "different than" enjoys an enormous popularity, nevertheless it is wrong "Different from" is right

**Restrictive and Nonrestrictive Elements** Woolley offers a useful rule for determining whether a given clause is nonrestrictive (may be set off by commas) or restrictive (must not be set off by commas) He says that if the main assertion of the sentence retains its meaning when the clause is omitted, the clause is nonrestrictive But if the omission changes the sense of the main assertion, the clause is restrictive

"That" is never used except in a restrictive sense; "which" may be used in either a restrictive or a nonrestrictive sense

**With and By.** These are often used interchangeably "With" should be used in speaking of inanimate objects and "by" in referring to animate agents

## CORRELATIVES

Conjunctions that are used in pairs are called correlatives Examples are not only but also, both and, either or, neither nor, not or, whether or

These conjunctions should be followed by parallel elements, if a predicate follows one, a predicate should follow the other If a prep-

ositional phrase follows one, a prepositional phrase should follow the other

The sentence "He was not only courteous to rich customers but also to poor ones" is faulty, as pointed out by Greever and Jones in their "Handbook of Writing" The phrases intended to be balanced against each other are "to rich customers" and "to poor ones" Instead the word "courteous" is balanced against "to poor ones" The correct form is "He was courteous not only to rich customers but also to poor ones"

Incorrect is the following "She could neither make up her mind to go nor could she decide to stay." The correct form is "She could neither make up her mind to go nor decide to stay" [Or] "She could not make up her mind either to go or to stay"

One should not write "I talked both with Brown and Miller" One conjunction is followed by a preposition and the other by a noun Correct usage is "I talked with both Brown and Miller" [Or] "I talked both with Brown and with Miller"

### SLANG

Medicine is a dignified science The attitude of the medical profession and of the public toward a scientific paper is dependent largely on the spirit in which the paper is written Much of the dignity accruing to medicine today is dependent on the fact that physicians usually have presented their contributions in language suited to the subject Few editors care to publish discussions of serious matters offered in a tone of levity. The following are examples from papers submitted to *The Journal*, indicating that the language of the street or of the preparation room is not suited to the discussion of surgical technic or of medical practice

We have long passed the stage where any operation is considered a success if the patient survives, and in this particular one, where lots of blood and two or three chunks of tissue extracted from the patient's pharynx means good throat surgery

A surgeon may be a "whiz" in the abdomen or in grafting bones, but a proverbial "bull in a china shop" in the throat

The G U man has appropriated the term "syphilis" but the fact that the initial lesion is frequently on the genitals does not make the disease other than systemic

He will not attempt an iridectomy or cataract extraction, but seemingly feels "T & A's are 'duck soup'" where as a matter of fact the finished specialist realizes there is little difference in the skill required for all when well done

I recall one of my first stricture cases (a woman) who had gone the rounds for three years. She spent a week in a hospital in Richmond, seeking a diagnosis. She did not have symptoms referable to the urinary tract and her physician did not cystoscope her. She then went to Asheville for a six weeks dietary treatment, and so on. She finally came to one of my associates, who requested cystoscopy. We were unable to get a filiform into the right ureter. We cystoscoped her every day for five days, finally getting a No. 2 olive tipped bougie to enter.

This was a strangulated affair of four days' duration.

### KEEPING SAME POINT OF VIEW THROUGHOUT PAPER

**Tenses** Writers often skip lightly from one tense to another, even in the same paragraph, and not infrequently confuse the reader. Furthermore, Woglom emphasizes that good reason does not exist for describing experiments in the past tense and microscopic morphology in the present, though this is common practice. Perhaps safest is to keep to the past tense in all descriptive matter. In the publications of the American Medical Association the past tense is used for verbs of saying or recording, except in reviews of the literature covering material published during only one year, in which the author may use the present tense if he prefers it and if he uses it consistently.

A related difficulty arises with regard to the expressions "he believed" and "he believes." In many instances it is impossible to determine whether the view cited is still held and therefore whether "he believes" is correct. "He believed" on the other hand, may leave the reader with the impression that the opinion has been abandoned. In the publications of this press the difficulty is avoided as a rule by changing the verb of thinking to a verb of saying, so that, for instance "Brown considered" becomes "Brown expressed the opinion." In reviews of recent literature in which the verbs of saying are in the present tense and in papers in which an author is discussing recent work by men whose opinions he obviously knows well, "he believes" is of course permissible.

Tenses should be used consistently also throughout a case report or description of experiments. Here also the past tense usually is chosen.

**Singular and Plural Forms** Serious misunderstanding as well as an impression that an author is careless may be caused by failure to retain the same approach throughout a paper, especially in regard to the use of singular and plural forms. You begin by speaking of "the eye" and "the kidney" and later find yourself mentioning "the frontal lobes" and "the lungs." Often a manuscript editor in the office of the American Medical Association is confronted by sentences such as these: "The fundus seemed normal." "In the scleras and corneas." When organs are spoken of in a general sense, they should be referred to consistently in either the singular or the plural, and when specific observations are described it should be stated whether one (if so, which) or both of the organs were examined or were affected.

Even more confusion is caused by a paragraph such as the following, which was taken from a manuscript received for publication:

In the thorax the intercostal or phrenic nerves may give rise to a neurofibroma, these often attaining a considerable size. The benignity of the tumor makes surgical removal a most satisfying procedure, and one who is familiar with operations on the thoracic wall and in the chest cavities has little difficulty in completely enucleating these growths. An example of neurofibroma of an intercostal nerve is seen in case 21. The relative softness of the lungs or other intrathoracic structures often allows one of these neoplasms to readily expand and assume a great size. Harrington has reported 14 cases of mediastinal or intrathoracic perineural fibroblastomata, and his success in treating these lesions again emphasizes the desirability of recognizing such benign growths and attempting surgical extirpation. Of 46 various intrathoracic tumors removed at operation, this author classified 14 of them as of nerve sheath origin, and 10 of these occurred in the posterior mediastinum. The presence of a neurofibroma in the posterior mediastinum and in the neck may lead to dumb-bell-shaped tumors which pass through into the spinal canal.

A similar faulty construction, not quite so confusing but equally illogical and more frequent, follows:

In these cases the lesions [it is understood that there was one in each case] began on the face and extended downward, finally covering the neck and the chest.

The author may argue that if there are cases there are also lesions, rather than a lesion. But are there not also faces, necks and chests? Moreover, if another author should quote only this passage, the reader

of the quotation might be forced to consult the original article to determine whether more than one lesion was present in each case

There can be no confusion if the sentence reads

In these cases the lesion began on the face and extended downward, finally covering the neck and the chest

### USE OF NOUNS AS ADJECTIVES

The American Medical Association Press avoids excessive use of nouns as adjectives to modify other nouns. This policy should not be interpreted as a series of 'Thou shalt not's' with regard to specific phrases. We wish to combat the tendency to eliminate adjectives from the language by supplanting them with nouns. The following excerpts from an article by Lord Dunsany in the *Atlantic Monthly*<sup>2</sup> state the problem admirably

The decay that is affecting our language is taking place among adjectives so much so that many of these necessary things have already died. One cannot prove that an adjective is dead merely because in so many hundred pages it never appears: the proof is when the need of that particular adjective arises and it is not used: a noun being thrown in to take its place: as a sheet of paper may stop a hole in a window in the absence of a pane of glass.

If you read of a strange man in an expensive car, that is no proof that other adjectives equally suitable are dead: but if you read of a mystery man in a luxury car that proves that the adjectives mysterious and luxurious have decayed away: for no one would otherwise use this lumber of nouns. There is of course no lack of meaning in a mystery man in a luxury car: only a lack of grace. I imagine that hundreds of things had names among savages a thousand years before those graces appeared by which the Romans for instance built their sentences: and I think that the deepness of the German forests which the legions did not easily penetrate is probably responsible for the German tendency to use heaps of nouns to this day: a clumsiness unknown in France and Italy.

When meaning disappears from modern sentences is the moment that a third noun is added to the heap: or even an honest adjective: as for instance if we were to write a great luxury man: it would not be quite clear whether we were intending a man who lived in great luxury or whether a luxury man of large size. If instead of the adjective great we have yet another noun the confusion is liable to be even worse. There are no landmarks to guide one through this confusion: for in a single copy of the *Times* I read two advertisements: the first of them spoke of best position seats—obviously the hyphen

<sup>2</sup>Dunsany, Edward. Decay in the language. *Atlantic Monthly* 157: 360-362 (March) 1936.



which was not there, should be imagined between the first word and the second, but there are no rules for this clumsy game, because the other advertisement spoke of a "great equality myth," and in that case the hyphen had to be understood between the second word and the third.

It may not be quite clear to my readers why the hyphen should have come in each case where I have said that it should, but I have had the advantage of reading the context, and have worked it out in that way. The alternative to reading the context is to know exactly which of several ambiguities the writer intends with his row of nouns, and for this purpose you must obviously know just what he intends to say. Does not this mean that in the language of jumbled nouns you can only say what everyone knows already? Then the writer with something new to say will not be understood, even when he has got a hearing.

Two years ago, when a large body of Canadian writers visited London, I pointed out to them at a meeting in the Mansion House some of the symptoms of this decay, and the direction in which it was progressing. I pointed out that instead of speaking of the English Eleven, which was playing cricket then against the Australians, they spoke of the England Eleven, evidently finding some quality in the noun that they could not perceive in the adjective, and I added that they spoke of the captain of this team as the England Eleven Captain, and that his selection was liable to be described as England Eleven Captain Selection, and that any difficulty in this selection might be written of nowadays as an England Eleven Captain Selection Difficulty. I then warned this gathering of writers that, if they did not all exert themselves to put some check upon this particular decay, the time would come when people would be writing of an England Eleven Captain Selection Difficulty Rumor. I hope that this day has not yet come, but we are hovering upon the brink of it, and the careful investigator may very likely be able to discover in modern writers a case of six nouns jostling each other, like lost railway trucks without couplings bumping each other noisily on a hull.

Let us not look down towards what our language is coming to, for the drop is too giddy and we may lose our heads, but let us look up to the heights from which we have fallen and, by reading good writers of a few decades ago, see how far we have slithered in a very short time. Those writers, if writing of the affairs of to-day, would have to learn a few new words, like "radiogram" and the noun "aerial," though they could teach us how to pronounce the latter word correctly. On the other hand, a translation of any of their writings into the language that I am complaining of would show how much we have lost. The opening lines of *Paradise Lost* might go, in prose, to-day something like this: "Of the first man disobedience and the forbidden tree fruit, whose death taste brought on world mortality."—Milton was thirty-six years old when he wrote this—"and our all woe, sing, Heaven muse, who on the Horeb or Sinai mystery top inspired," etc.

Take the word "weather." It was well enough understood by our ancestors, and had a big share in shaping our destinies, but nowadays the word is never used without being propped up and supported by the ridiculous word "con-

ditions" It makes me think of an old wall supported by a broom or a disused cupboard or the ruins of a rusty perambulator, yet you cannot harm a wall by propping it up with absurdities, whereas you can harm a word by such odds and ends A people that has never seen the word "weather" used without that old clothes prop leaning against it will soon be unable to recognize it when the rubbish is cleared away, and so a fine word will be lost to a people that surely has need of it Or can anybody show me a case where the words "weather conditions" have ever been written by anyone in which the plain honest word 'weather' did not say all that was needed? I will maintain that in one per cent of all the cases in which the words "weather conditions" are used the word "weather" is equally good alone, and that in ninety nine per cent of these cases it is better, leaving none at all in which the word "conditions" does not waste printer's ink

A dead adjective that I lament perhaps more than any other is the word "hostile," the disappearance of which throws the word "enemy" from its place to do the work of the lost adjective You read *no more of the enemy's troops or the enemy's position*, it would be the 'enemy troops' and the "enemy position", and such a line as *Hupling's* —

When the guns of the enemy wheel into line,

would no longer be written One has only to read any history of any war prior to the Great War to see how a certain splendor has now been lost from such narratives by the disappearance of the enemy himself, his presence being denoted only by this false adjective, doing work that does not properly belong to it

### ACQUIRING A GOOD STYLE

The formula for acquiring a good literary style has two ingredients reading and practice Extensive reading of the works of good writers invariably will increase the vocabulary and improve the style

A style that flows attractively from the pen comes only as the result of much practice "A well constructed phrase," said Flaubert, "adapts itself to the rhythm of respiration" Clauses and phrases of even length permit proper emphasis

Write and rewrite, rewrite again and then revise!

# The Subject and the Material

A distinct change is apparent in the type of papers appearing in medical journals today as compared with those of 1905. The therapeutic articles of the past, replete with favorite prescriptions, have given way to scientific contributions on therapeutic methods, pharmacology, pathology, etiology, methods of diagnosis and prophylaxis. The difference can be appreciated only by those who were in practice in the earlier period or by those who will compare the journals of that time with those of today.

Dr. Charles Singer,<sup>1</sup> in his essay on "Greek Biology and Its Relation to the Rise of Modern Biology," described a complete contribution of the best type in modern scientific literature. "The author begins," said Singer, "by pointing out a gap in knowledge. Having stated his problem, he reviews the efforts made by others to illumine this dark place in knowledge. He points out some of their errors or decides to accept their work and base his own upon it. Perhaps he distrusts their experiments or would like to re-interpret their results. Having summarized their labours he details his own experiments and observations.

"But he is not able to tell us all of these. Space will not permit him to tell us how he embarked on many different lines of work and abandoned them as unprofitable or too difficult, nor anything of the months or years spent in merely repeating the experience of others. He says no word of how he acquired and improved his experimental skill and technical experience. He tells merely of those developments of his work that have yielded him results. . . . When by gradual steps he had at last reached, or perhaps with the instinct of genius had more quickly discerned, a profitable direction for his investigations, he reached after a time those conclusions which his final line of work has verified and rendered more exact. It is this final

<sup>1</sup> Singer, Charles. *Greek Biology and Its Relation to the Rise of Modern Biology* in *Studies in the History and Method of Science*. Oxford, England: Clarendon Press, 1921, vol. 2, p. 1.

process of verification that he mainly describes in his article, and it is the details of this that occupy the bulk, perhaps nineteen-twentieths or more, of all that he has to say. Then having described these verificatory experiments, he summarizes his conclusions in a short paragraph of a few lines."

## TYPES OF ARTICLES

Medical articles may be classified in definite types, including

- 1 The case report
- 2 The description of a new instrument
- 3 The clinical note or suggestion
- 4 The review of literature
- 5 The essay
- 6 The report of research
- 7 The complete consideration of a single disease
- 8 The monograph
- 9 A combination of two or more of these types

### THE CASE REPORT

The foundation of clinical medical literature is the case report. The scientific level of the profession has risen so much in recent years that a physician hesitates to give a report of an interesting case simply as a case report, he thinks he must make an exhaustive survey of the literature. Instead of a brief, practical report, he submits an unnecessarily exhaustive review which few, if any, care to read. Often a mass of details, including unimportant, irrelevant and negative observations, is presented without regard to clearness of expression. Usually, if the historical review appears to be unnecessary and the case is an interesting one, the author should simply publish his case report and omit the review of the literature. A clinical report made with judgment and with the correct appreciation of relative values is always welcomed by both editor and reader.

**Technic of the Case Report** A case report should tell its story in clear, straightforward, narrative style. It should not be transcribed word for word from original records that were hastily jotted down at the time the various events occurred, the jerky, telegraphic style of the record sheet may result in actual padding. For example

Patient, A178493, Giuseppe Roverano Age 35 years Color, white Nationality, Italian Occupation, laborer Condition, married Complaint, inflammatory rheumatism Entered Brown Hospital, Jan 17, 1948

A shorter and more satisfactory description would be

G R, an Italian laborer aged 35, married, entered the Brown Hospital on Jan 17, 1948, complaining of inflammatory rheumatism

**Quoted Reports** Laboratory and other reports made by someone other than the author which have not been published elsewhere should not be copied in their original form but should be edited to conform to the style of the rest of the case report Material which has been published should be quoted exactly unless there are obvious typographic or mechanical errors Whenever material is quoted, written permission for its publication should be obtained from the writer and the publisher

**Negative Observations and Unnecessary Material.** The hospital record number is not required in a case report While it may serve a purpose within the hospital to identify the case for the members of the staff, it means nothing to the reader Further, it may give rise to a false impression as to the number of cases which have been observed in the institution by the physician

Mention of observations that are unimportant or that do not bear on the clinical history of the case should be avoided Negative results are of value in few instances, and they should be cited only when necessary An author who reports a case of compound fracture of the femur need not trouble to say that the lips, throat and ears were normal If, however, you are reporting a case of arthritis, it may be worth while to say that examination of the heart did not yield observations of importance, because pathologic changes in the heart may be associated with arthritis "Mrs J J, married," is redundant, for "Mrs " indicates marriage, but "Mrs J J, a widow," conveys additional social information that may have some bearing on the case In a case report that was received by *The Journal of the American Medical Association*, the author concluded the personal history of the patient with the doubtfully important information, "This boy was named after the writer "

Elimination of all negative or irrelevant material from a report is a valuable exercise from the point of view not only of good English com-

position but also of scientific knowledge. The physician who is well informed will not give all the minutiae of a normal blood count or of a normal differential leukocyte count. He will not provide a perhaps highly entertaining but valueless account of the various illnesses suffered by all the members of the patient's family. He will not say that the patient had the usual illnesses of childhood, but, if any of these illnesses had a bearing on the condition, he will state what the illness was and about when it occurred. The elimination from the case report of nonessential material will make a clinical picture that will be as striking as a marble bas relief in its proper emphasis on various features and in its subduing of background.

Here are some examples of irrelevant material included in case reports. The irrelevancies are italicized.

*At 11 45 p.m. near the outskirts of a small village, 20 miles away, an infant was born to a primiparous mother on Thursday, Oct. 14, 1947. The delivery occurred on a trundle bed in a darkened corner of a room illuminated only with a single kerosene lamp. The attending physician, a rural practitioner, had been with many mothers under similar circumstances. As he knelt over to clamp, cut and ligate the cord, his hand felt a mass lying on the front and side of the child's abdomen. The mass was soft and pliable, and as he ran his experienced fingers over its surface he located the cord emerging directly from the mass itself.*

*He carried the child over to the lamp and to his amazement there was present on its abdomen a large part of its intestine. It was readily seen and felt through the thin transparent membrane which close inspection revealed to be the cord itself enormously dilated. The intestines protruded along the course of the cord a distance of some 5 or 6 inches. The mass itself was the size of a large coconut.*

*This newly born baby was delivered in precipitate labor while the mother sat on the stool, supported one on either side by two neighboring women.*

*On my arrival at the time (a private home) all indications pointed to very unusual circumstances—I hastily entered the home and found just such a condition as stated in my opening. Collecting my wits included many things and wondering what step to make first while going thru a sterilizing process with the help of the husband who had arrived a short time previously I planned an examination to determine if the babe was delivered and if still alive. The husband raised the mother sufficiently to afford a hasty examination which revealed baby was delivered and was dead from drowning. We placed them in a warm bed, the husband carrying the mother while I supported the babe. Thus done I hastily divided the Fetus. Placed the babe in a warm room upon a table.*

Nowhere are negative observations more frequently encountered than in the recapitulation of autopsy records. Sometimes such reports are practically the transcript of the stenographer's record, dictated as the examination progressed. In most instances it is sufficient to present

only the anatomic diagnosis, with all the pathologic observations, and then to give in detail the description of the particular pathologic changes with which the discussion is concerned

**Confusion of Time** A common fault in case reports is indefiniteness in sequence of events as to time it is illustrated in the following skeleton of a case report submitted for publication

CASE 3 A D Feb 8 1947 Hairpin in the bladder and renal infection  
 Girl 22 years old first seen three years ago Two years ago her kidney was explored  
 A year ago this patient went to the city hospital Soon after this I heard of her as a patient with marked polyuria From the early part of the summer until August she had retention of urine and had to be catheterized  
 Five weeks ago she allowed a friend to attempt catheterization I saw her three weeks ago and found the hairpin I was not then allowed to remove it  
 On February 3 she told me that the day before she had had pain in the left renal region Examination next day showed marked cystitis The pin was removed Within four days the patient was discharged

January 1948 Two weeks after leaving the hospital another pin was found in the bladder

And here is another example

He was born and lived in Turkey until he was 12 when he came to the United States He spent two years in Boston and the remainder of the time in California He had had malaria 10 years ago and typhoid two years ago About four years ago his skin began to itch whenever he became warm

As a paper may not be published for months after it is prepared, the time should be stated specifically instead of being referred to as three, five or nine months or years ago

**Tense** Tenses should be used consistently A frequent error occurs when the author follows a case report with a description of a pathologic specimen or of a section viewed under the microscope Often the history of the case is given in the past tense and the pathologic report in the present tense These should be uniform The simplest way usually is to use the past tense throughout

In the description of observations that have been continued, it is logical to regard the time of writing as the present and to say, for instance, "At the time of writing the patient is well"

In the summary of a paper, the present tense should be used, as in

the following sentence "A case of myxedema is reported, and the literature is reviewed"

**Coined Abbreviations** In many institutions it is customary to use certain abbreviations in case records, this is excusable, for it saves space and makes reference easy for those who know what the abbreviations mean. In material for publication, however, the use of abbreviations should be avoided. During the war, a craze for abbreviation developed, perhaps associated with the large amount of so-called paper work, an inevitable accompaniment of army life. The general use of original or coined abbreviations should not be tolerated. Such abbreviations as "W D & N" for "well developed and nourished," "H & L O K" signifying "heart and lungs normal" and "L L L N R" for "left lower lobe no rales" are an abomination. The manuscript editor who is confronted with such hieroglyphics can sympathize with the diagnosis "G O K," which, it is said, appeared on many case records in hospitals during the war, signifying "God only knows." Abbreviations not in dictionaries or in ordinary textbooks are permissible only in tables, there, if not obvious, they should be explained in footnotes.

**Form of the Report** The simple case report may begin at once with the history and record or, preferably, may be introduced with a statement of why the author considers it desirable to report the case. If the latter method is followed, the author will aid the reader and the manuscript editor by clearly indicating the separation in the following manner

There is no record of chronic poisoning from potassium nitrate in standard works on toxicology or therapeutics nor does a fairly extensive search of the literature reveal any report of such poisoning

#### REPORT OF CASE

A farmer aged 57 whose general health had always been excellent was first seen by me on Feb 20 1947. He appeared acutely ill

In the report of a case of any length, the description may be broken up by side headings. Paragraphs may be devoted to the patient's history, family history, physical examination, laboratory examination, course, results and if any postmortem observations.



In longer manuscripts, in which several or many cases are briefly reported merely as a matter of record, a single paragraph may be given to each case

#### THE DESCRIPTION OF A NEW INSTRUMENT

Ordinarily it is sufficient to describe an instrument in as few words as possible, depending largely on the accompanying illustrations of the device or apparatus to tell the story. A photograph of the device usually is better than a freehand drawing, although a drawing by a competent artist is more easily reproduced. A diagrammatic line drawing and a photograph of the device in use generally are most satisfactory. The publication of a description of an apparatus that has not been manufactured and used is to be condemned.

#### THE CLINICAL NOTE OR SUGGESTION

In the course of his practice, a physician frequently discovers minor clinical signs and symptoms of importance, short cuts in procedure, bizarre occurrences or similar matters of general interest that are worth publishing. They may not merit a thorough report, rather, they may be covered in letters to the editor or in brief clinical suggestions occupying a paragraph. Such suggestions or practical paragraphs are read by almost every reader whereas many would pay little or no attention to a long article.

#### THE REVIEW OF LITERATURE

One of the most valuable—and sometimes the most useless, depending on how it is prepared—types of contribution is the review of knowledge on a given subject. If the review is made by one who is familiar with the literature, and who has had sufficient experience to select with judgment and to discard with even more care, the contribution may be important. If, however, the work is done by an assistant who has been instructed to obtain references to the available literature on the subject and to arrange these in chronologic or some other order, it is likely to be a hodgepodge and of wearisome length. It is manifestly impossible to abstract all the literature in the course of a brief article on such a subject as tuberculosis, syphilis or influenza during an epidemic.

### THE ESSAY

Manuscripts of the essay type include presidential addresses, forecasts as to the future of medicine and discussions of the economic problems and the social status of the physician—more or less exhaustive discussions of selected subjects in which physicians are interested as citizens and as professional men rather than as scientists. They are obviously more literary than the usual contributions, and the physician may allow himself a latitude in literary allusion, diction and personal reference not permissible in the ordinary scientific paper. The published addresses of Sir William Osler, Sir Clifford Allbutt, S. Weir Mitchell, Oliver Wendell Holmes, William S. Thayer, Harvey Cushing, Da Costa and Berkeley Moynihan are examples of this type.

### THE REPORT OF RESEARCH

No better outline of the form to be followed in a report of medical research is available than that by Dr. Charles Singer, described in the quotation at the beginning of this chapter. Emphasis may be placed again on the necessity of rigid elimination of nonessentials. The problem should be stated clearly, the literary references should bear directly on the problem, the protocols of experiments should include only experiments that yielded actual information, clinical records and autopsy reports should be pruned religiously, there should be a well organized summary, and the conclusions should be succinct and include only statements that are warranted by previous knowledge and the present observations.

One of the most common faults is duplication. Frequently a report of research is accompanied by extensive charts and tabulations that repeat material brought out in the text. Often a paper is received in which the observations are fully stated in the protocols of the experiments, summed up in a running account in the summary, restated and resummed up in extensive tables and again pictured graphically in intricate charts. The procedure is much like presenting a diner with three desserts composed of strawberries, fresh strawberries, strawberry preserves and strawberry pie.

## THE COMPLETE CONSIDERATION OF A SINGLE DISEASE

Textbooks have long since made familiar the logical sequence *definition, etiology, pathology, epidemiology, symptoms, diagnosis, differential diagnosis, prognosis, prophylaxis and treatment*. From time to time it is desirable to take up a single disease and to consider it under all these headings. Such a study may be made in the preparation of textbook material or of an article to be included in a system of medicine. Again, the sudden outbreak in epidemic form of an unusual illness or even of some common disease may make it worth while to review the subject completely for periodical publication. Ordinarily the writer will find it satisfactory to confine himself to the single phase of the disease which he wishes to discuss and on which he has something new to offer. This caution may seem unnecessary, but many manuscripts are received in which the reporting of a single new observation has been made an occasion to repeat much material that is easily available in the ordinary textbook.

## THE MONOGRAPH

A monograph is a special treatise on a single subject. Usually after an author has made an extensive series of investigations on some topic, he desires to present all the material in a single publication. In preparing a monograph, he will do well to outline all the material, in order to avoid duplication. Only the special periodicals publish monographs, and because of their character the author may be asked to bear a portion of the expense.

## SUMMARY AND CONCLUSIONS

The summary—a brief abstract of the article—may appear at the beginning or at the close. Not every article should be summarized. Those of more than average length (more than 1,500 words), those which involve much description of detail and technic and those which aim at a complete survey of literature on the particular subject demand a summary. A brief digest of a long article in the introductory paragraph often will stimulate someone to read the article who otherwise would not.

The summary should recapitulate observations reported or repeat statements of fact. The writer should not say simply that certain phases of a subject are discussed or that a certain type of case is reported. Such a summary wastes space without giving additional information or emphasizing significant facts. Manuscript editors usually will delete sentences offered as a summary which are without importance in emphasizing the material in the article itself.

The conclusions—the deductions drawn from the cases presented, the experiments or other facts set forth—appear at the close. Conclusions are of special value, particularly since they lead to wider abstracting. Conclusions are “fat” for abstracters and for editors who are looking for “fillers.” If an author is anxious to have his conclusions reproduced by other journals, he should rigidly condense them, yet make them clearly reflect his premises and deductions.

Conclusions, which usually are more or less coordinate in structure and substance, frequently gain effectiveness by being numbered. Items in a summary or in a combination of summary and conclusions, however, as a rule should not be numbered, for they are not coordinate. In the following example the numbering is correct. Had all the paragraphs been numbered consecutively, the effect would be illogical and misleading.

A series of 103 cases of various functional dermatoses and 7 cases of true eczema were studied.

Every patient was subjected to epidermal and dermal testing by means of patch tests and scratch tests performed with a standard set of 74 substances.

From the data obtained we believe that the following conclusions may be drawn:

1. Epidermal hypersensitivity as manifested by a positive reaction to a patch test is present in patients with eczema-dermatitis venenata as an unchanging reaction to the causative substance.

2. Epidermal hypersensitivity is rarely, if ever, present in patients with functional dermatoses.

3. Dermal hypersensitivity as manifested by a positive reaction to a scratch test is noted occasionally in patients with eczema and the causative substance is frequently the cause of an accompanying hay fever or asthma.

The value of the summary and the conclusions is appreciated less by the average writer than by the average reader. The busy physician

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use quotations either to have an accurate typewritten copy made of all material which he may include at the time the book or periodical is consulted or, if this is not convenient, to have the passages chosen rechecked when the final copy of the manuscript is being made.

Laboratory reports made by other physicians, personal communications and other material which has not been published elsewhere may, and should, be edited in the same style as that used for the rest of the paper. Such material usually is not written for publication and is not prepared as carefully as it would have been had the writer known it would appear in print under his name.

# Construction of the Manuscript

Ideally, the framework of a paper should be outlined before writing is begun. This framework may include headings for short imaginary chapters, each chapter covering a subdivision of the subject. If the article is to be elaborate, each heading may be further subdivided. This will avoid the repetition of facts or ideas—a common fault. A suitable title, informative subheads, a clear summary and cogent conclusions represent the framework of a well constructed paper.

## THE TITLE

The title is more important than the average medical writer realizes. If an author wants his contribution to become a part of the literature on the subject, he must give it a name that will identify it, that is descriptive. Thousands of papers lie buried in medical literature because their titles did not designate the subjects. The title should be short, but inclusiveness should not be sacrificed for brevity. Often a long title may seem necessary, although usually brevity and clearness may be gained by the use of a main title and a subtitle. A title should consist of not more than 90 letters, counting spaces between words as letters.

Hardly anyone remembers such unwieldy titles as "Brain Tumor of Psychomotor Area, Causing Jacksonian and Generalized Convulsions, Visual Hallucinations. Somatic Operation, Recovery, Mental and Physical." With that title, why write a paper? Another unwieldy example "Erythromelalgia. Report of a Case Presenting Peripheral Vasomotor Disturbances in the Hands and Feet for Twelve Years, Reaching a Climax in Eight Years, with Recovery Following Treatment by Adrenal Substance." These two examples are taken from published papers. The following was the original title of a paper that was submitted to *The Journal*: "To Obtain Graphs Showing the Rapidity and Degree of Decrease in Temperature in the Eye and Orbit Produced by the External Application of a Given Degree of Cold over a Given Area for a Given Time, and a Numerical Expression, at Least Approximate, of the Relation of These Variables to

Each Other" What could an indexer or cataloguer do with such a title? This title should be rewritten thus "Coefficient of Thermal Conductivity of Eye and Orbit Measured with Application of Cold"

**Ambiguity.** Misleading titles should be avoided "A New Chloroform Danger" was the caption of another manuscript In looking up references to the literature on the dangers of anesthesia a physician would have been attracted by the title, and after laboriously searching for the article he would have discovered that he had been misled The title became "Danger in Similarity of Ether and Chloroform Containers," which stated the subject of the communication First impressions are lasting, a catchy title catches readers The title ought to be carefully thought out and should give a clear indication of what is to come

The following titles, taken from papers published in medical periodicals are examples of the ambiguous types which cause distress to those responsible for indexing medical literature

Foci of Infections Above Collar Bone and Importance of Their Early Recognition	Idle Thoughts on Medical Education Render unto Caesar Macedonian Call
Borderline Cases	School Follicles
Ideas in Syphilology	Curing from Yon to Hither
Odd Experience of a Young Practitioner	Clinical Observations Suggestions
The Emergency Abdomen	Sepelire Malum Resuscitare Bonum
The Abused Cervix	Some Stomachs I Have Met

**The Subtitle.** If it is necessary to include much material in the title, it should be divided into a main title and a subtitle For example, the title "A Precise and Simple Method for Counting of Blood Cells and Bacteria Without a Special Chamber" became "Counting of Blood Cells and Bacteria," with the subtitle "A Precise and Simple Method Without a Special Chamber" "Disturbances of Conditioned Reflexes Observed in Study of Functional Changes in the Brain of the Dog After Removal of the Cerebral Blood Supply, in This Case by Ligation of the Arteries Supplying It" might be expressed as a main title, "Functional Changes in the Brain of the Dog After Reduction of Its Blood Supply," and a subtitle, "Disturbances of Conditioned Reflexes After Ligation of Arteries" Other examples are given on pages 34 and 35



**ORIGINAL TITLES**

THREE HUNDRED AND THIRTY LOW, CERVICAL  
CESAREAN SECTIONS (LAPAROTRACHELOTO-  
MIES) WITH TWO DEATHS

---

A CASE OF DERMATITIS GANGRENOSA  
INFANTUM

---

STUDY OF A CASE OF ACNITIS, WITH PAR-  
TICULAR REFERENCE TO THE BAC-  
TERIOLOGIC FINDINGS

---

FURTHER STUDIES IN ECZEMA AND DERMATITIS

---

SYNDROME OF AVELLIS, WITH A REPORT  
OF THREE CASES

---

BACTERIOLOGIC STUDIES IN ACUTE ENTERITIS  
IN INFANTS AND YOUNG CHILDREN, INCLUD-  
ING BACTERIOLOGIC METHODS, MORPHOL-  
OGY AND CULTURAL CHARACTERISTICS  
OF STREPTOCOCCUS MICRO-APOIKIA  
AND CLINICAL STUDIES ON  
FORTY-SIX PATIENTS  
WITH ACUTE  
ENTERITIS

---

THE STUDY OF BRONCHIAL ASTHMA AND  
ALLIED ALLERGIC DISORDERS UNDER  
CONTROLLED CONDITIONS OF  
ENVIRONMENT, TEMPERA-  
TURE AND HUMIDITY.  
A PRELIMINARY  
REPORT

IMPROVED TITLES

LOW, OR CERVICAL, CESAREAN SECTION  
(LAPAROTRACHELOTOMY)

THREE HUNDRED AND THIRTY OPERATIONS,  
WITH TWO DEATHS

---

DERMATITIS GANGRENOSA INFANTUM

REPORT OF A CASE

---

ACNITIS, WITH PARTICULAR REFERENCE TO  
THE BACTERIOLOGIC FINDINGS

REPORT OF A CASE

---

ECZEMA AND DERMATITIS

---

SYNDROME OF AVELLIS

REPORT OF THREE CASES

---

ACUTE ENTERITIS IN INFANTS AND IN  
YOUNG CHILDREN

BACTERIOLOGIC, MORPHOLOGIC AND CULTURAL STUDIES OF  
STREPTOCOCCUS MICRO-APOLKIA, CLINICAL STUDIES  
ON FORTY-SIX PATIENTS

---

BRONCHIAL ASTHMA AND ALLIED ALLERGIC  
DISORDERS

PRELIMINARY REPORT OF A STUDY UNDER CONTROLLED  
CONDITIONS OF ENVIRONMENT, TEMPERATURE  
AND HUMIDITY

## THE AUTHOR'S NAME

Much unnecessary confusion arises in the indexing of medical literature because authors sign their names in different manners in different countries. In France and in Germany many writers sign only their surnames, others use only initials for the first name. Many authors in foreign publications sign the name at the close of the article.

The Italians sometimes write the given name last. The Spanish frequently follow the father's surname with the mother's maiden name, and it is difficult to tell which is the baptismal name and which the surname. For example, Dr. Remigio Salazar should be indexed as R. Salazar, under the S's, while Dr. Álvarez Sierra ■ Dr. Álvarez, and Sierra ■ to be disregarded. Then, again, for personal reasons some Spanish writers prefer to be known by the mother's family name, so Dr. Angel Pérez Martín is always called Dr. Martín and Dr. Gómez y Giocoechea, Dr. Giocoechea. Prof. Santiago Ramón y Cajal signed himself Cajal, rather than Ramón. References to the works of these men, however, should be indexed under the father's surname, the name being listed, for instance, as Pérez Martín, A.

Chinese names usually are written with the surname first and the name which corresponds to the Christian name second, in two words with a hyphen between them, for instance, Wu Lien-tech. Some write their names with the surname last but still hyphenate the given name, as Lien-tech Wu. Still others use only the initials, in which case the surname is always the last, as L. T. Wu. When the second name ■ not hyphenated, it is difficult to know which is the surname and which the given name. When there is only one word to the second name, the surname should always be written first, as Wu Hsien, when Wu is the family name. In ■ few instances there are two syllables in the surname as well as in the given name, then the first two should be the surname, as Ou-Yang Yu shen.

Obviously in consulting American and English literature, the Spanish speaking physician is at a loss and is likely to refer to Dr. Oliver Wendell Holmes as Dr. Wendell. The American practice in recording literature, that of giving the last name first, followed by a comma and the given name, sometimes produces errors, thus,

Dr Ruth Tunnichiff is mentioned frequently in foreign indexes as Dr Tunnichiff Ruth, and Dr Marion Van Slyke sometimes is referred to as Dr Van S Marion. A young author should decide early in his career the manner in which he wishes his name to appear and should not change thereafter. Sir William Osler always signed his communications "W Osler." Obviously, if the name is a common one, such as Smith, Brown or Johnson, and only the first initial is signed by the author, identification for indexing purposes is not easy. It is advisable for authors whose names are not widely known to sign the full name or, in any event, to adopt a consistent form and to follow it regularly.

### SUBHEADINGS

Subheadings enable the reader to find the points in which he is most interested. Center heads break up pages of solid type, which repel the reader, and aid the author to present his subject logically and concisely. It is to be regretted that center heads are not used more commonly in medical and other scientific journals. The author is more competent than the copy editor to furnish subheadings. To supply these may be additional work, but it is worth while, it makes the article more attractive and thus more likely to be read.

If the author has prepared his article systematically, he will have collected his material according to various phases of the subject. Thus, he may have an introduction, bibliographic references arranged chronologically or by classes, case reports, protocols of experiments, a summary and conclusions. Obviously, these represent center headings under which may come still more detailed subheads.

As the author plans his system of headings, he should bear in mind the fact that all material included under one heading should belong to it and that if the subject is changed another heading must be inserted.

### CODE FOR HEADINGS

As indication of the various sizes of type and possible headings and subheadings that may be used, the code used by the press of the American Medical Association is given on pages 38 and 39. The type for a heading is indicated by placing the appropriate number in a small ring

- 1 10 POINT OLD STYLE CAPS
- 2 10 POINT OLD STYLE SMALL CAPS
- 1 & 2 10 POINT OLD STYLE CAPS AND SMALL CAPS
- 3 ■ POINT OLD STYLE CAPS
- 4 8 POINT OLD STYLE SMALL CAPS
- 3 & 4 8 POINT OLD STYLE CAPS AND SMALL CAPS
- 5 *8 Point Old Style Italic Caps and Lower Case*
- 5A 8 POINT OLD STYLE ITALIC CAPS
- 6 *10 Point Old Style Italic Caps and Lower Case*
- 7 10 POINT OLD STYLE ITALIC CAPS
- 8 ■ POINT BLACK LETTER CAPS, CENTER HEAD
- 9 8 Point Black Letter Caps and Lower Case Center Head
- 10 8 Point Black Letter Caps and Lower Case, Side Head
- 10A 8 POINT ITALIC BLACK LETTER CAPS CENTER HEAD
- 10B *8 Point Italic Black Letter Caps and Lower Case Center Head*
- 10C *8 Point Italic Black Letter Caps and Lower Case, Side Head*
- 11 6 POINT OLD STYLE CAPS
- 12 6 POINT OLD STYLE SMALL CAPS
- 11 & 12 6 POINT OLD STYLE CAPS AND SMALL CAPS
- 13 *6 Point Old Style Italic Caps and Lower Case*
- 14 6 POINT OLD STYLE ITALIC CAPS
- 15 10 POINT BLACK LETTER CAPS
- 16 10 Point Black Letter Caps and Lower Case
- 17 6 POINT MODERN CAPS
- 18 6 POINT BLACK LETTER CAPS
- 19 *6 Point Black Letter Caps and Lower Case*
- 20 6 POINT MODERN CAPS
- 20A 6 POINT BLACK LETTER CAPS
- 21 *6 Point Black Letter Caps and Lower Case*
- 22 6 POINT NO 16 CAPS
- 23 6 POINT NO 16 SMALL CAPS
- 22 & 23 6 POINT NO 16 CAPS AND SMALL CAPS
- 24 ■ POINT NO 16 ITALIC CAPS
- 25 *6 Point No 16 Italic Caps and Lower Case*
- 26 8 POINT NO 16 CAPS
- 27 8 POINT NO 16 SMALL CAPS
- 26 & 27. 8 POINT NO 16 CAPS AND SMALL CAPS
- 28 8 POINT NO 16 ITALIC CAPS
- 29 *8 Point No 16 Italic Caps and Lower Case*

- 30. 10 POINT NO. 16 CAPS
- 31. 10 POINT NO. 16 SMALL CAPS
- 30 & 31. 10 POINT NO. 16 CAPS AND SMALL CAPS
- 32. 10 POINT NO. 16 ITALIC CAPS
- 33. 10 Point No. 16 Italic Caps and Lower Case
- 34. 12 POINT OLD STYLE CAPS
- 35. 12 POINT BLACK LETTER CAPS
- 36. 12 Point Black Letter Caps and Lower Case
- 37. 12 POINT REMINGTON TYPEWRITER CAPS
- 37A. 10 POINT REMINGTON TYPEWRITER CAPS
- 38. 12 Point Remington Caps and Lower Case
- 38A. 10 Point Remington Caps and Lower Case
- 39. 14 POINT OLD STYLE CAPS
- 40. 14 POINT BLACK LETTER CAPS
- 41. 14 Point Black Letter Caps and Lower Case
- 42. 6 POINT METRO MEDIUM CAPS
- 42A. 6 Point Metro Medium Caps and Lower Case
- 42B. 6 POINT METRO MEDIUM ITALIC CAPS
- 42C. 6 Point Metro Medium Italic Caps and Lower Case
- 43. 8 POINT METRO MEDIUM CAPS
- 43A. 8 Point Metro Medium Caps and Lower Case
- 43B. 8 POINT METRO MEDIUM ITALIC CAPS
- 43C. 8 Point Metro Medium Italic Caps and Lower Case
- 44. 10 POINT METRO MEDIUM CAPS
- 44A. 10 Point Metro Medium Caps and Lower Case
- 44B. 10 POINT METRO MEDIUM ITALIC CAPS
- 44C. 10 Point Metro Medium Italic Caps and Lower Case
- 45. 6 Point No. 17 Self-Spacing
- 46. 6 Point Rogers
- 47. 6 POINT LINING GOTHIC (SIZE 1) LIGHT FACE
- 47A. 6 POINT LINING GOTHIC (SIZE 1) BLACK FACE
- 48. 6 POINT LINING GOTHIC (SIZE 2) LIGHT FACE
- 48A. 6 POINT LINING GOTHIC (SIZE 2) BLACK FACE
- 49. 6 POINT LINING GOTHIC (SIZE 3) LIGHT FACE
- 49A. 6 POINT LINING GOTHIC (SIZE 3) BLACK FACE
- 50. 6 POINT LINING GOTHIC (SIZE 4) LIGHT FACE
- 50A. 6 POINT LINING GOTHIC (SIZE 4) BLACK FACE

in front of the heading For a center head, the words are placed in the center of the line and the end of the head may be indicated by the sign ¶

NOTE If figures appear in a heading, no 17 should be employed instead of no 4 and no 11 instead of no 2

### TYPE

**Sizes of Type.** In the publications of the American Medical Association Press 10 point type is used for most of the material in original articles Eight point type is used in such articles for case reports and protocols, for detailed descriptions of experiments and for descriptions of method and of apparatus (unless such a description constitutes the main part of an article) Eight point type is used as a rule for abstracts, society transactions, book reviews, quotations of more than three or four lines and other miscellaneous material Six point type is used for tables and for tabulations requiring several columns Footnotes and bibliographies are set in 8 point type except in *The Journal of the American Medical Association*, in which 6 point is used

**Use of Italics** Excessive use of italic type detracts from the simplicity of style desirable in scientific publications In the publications of the American Medical Association italics are used sparingly The use of italics for emphasis of words or phrases is permitted only when the effect can be secured in no other way

The following rules are observed

Italics are used by some presses

1 For foreign words and phrases, including names of diseases (other than Latin), which are preceded by the sign ¶ in Webster's "New International Dictionary" to indicate that they have not been anglicized, or which are not given in the leading medical dictionaries such as "Blakiston's New Gould Medical Dictionary" or Dorland's "American Illustrated Medical Dictionary"

2 *Sparingly* for emphasis

3 For the names of periodicals in text matter or in references in parentheses in society transactions, discussions and legends for illustrations

4 For principal side headings, and sometimes for brief summaries at the beginning of case reports or protocols

5 For headings of tables

6 For letters and numbers, in the text or in legends, which designate parts of illustrations

7 For letters designating parts of footnotes, except when they are used with superior figures

- 8 For lower case letters used in enumeration
- 9 For scientific names of organisms
- 10 For names of foreign societies
- 11 For letters designating unknown quantities, for lines, areas, volumes, etc., in mathematical expressions
- 12 For names of ships

### Italics are not used by some presses

- 1 For anglicized foreign words and phrases in common use or for Latin names of diseases
- 2 For titles of books or of articles in periodicals
- 3 For emphasis of entire sentences or paragraphs
- 4 For names of periodicals in footnotes
- 5 For abbreviations of trigonometric functions (sin, cos, tan, cot, sec, cosec) in mathematical expressions

**Greek Letters and Symbols** When Greek letters are used, it is desirable to identify them for the typesetter, either by writing the name of each letter in full in the margin or by using the appropriate number from the code given here

87 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120  
 Α Β Γ Δ Ε Ζ Η Θ Ι Κ Λ Μ Ν Ξ Ο Π Ρ Σ Τ Υ Φ Ψ Ω

121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137  
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41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58  
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59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78  
 δ ε ζ η θ ι κ λ μ ν ξ ο π ρ σ τ υ φ ψ ω

Mathematical and other symbols likewise should be identified in the margin. It is especially important to mark minus signs, which may be confused with hyphens



in front of the heading For a center head, the words are placed in the center of the line and the end of the head may be indicated by the sign ¶

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- 3 For emphasis of entire sentences or paragraphs
- 4 For names of periodicals in footnotes
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97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120  
 A B Γ Δ Ε Ζ Η Θ Ι Κ Λ Μ Ν Ξ Ο Π Ρ Σ Τ Υ Φ Ψ Ω

121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137  
 α β γ δ ε ζ η θ ι κ λ μ ν ξ ο π ρ σ τ υ φ ψ ω

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25  
 α β γ δ ε ζ η θ ι κ λ μ ν ξ ο π ρ σ τ υ φ ψ ω

26 27 28 29 30 31 32 33 34 35 36 37 38 39 40  
 α β γ δ ε ζ η θ ι κ λ μ ν ξ ο π ρ σ τ υ φ ψ ω

41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58  
 ι κ λ μ ν ξ ο π ρ σ τ υ φ ψ ω

59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76  
 α β γ δ ε ζ η θ ι κ λ μ ν ξ ο π ρ σ τ υ φ ψ ω

**Mathematical and other symbols:** When mathematical and other symbols are used, it is desirable to identify them for the typesetter either by writing the name of each symbol in full in the margin or by using the appropriate number from the code given here. It is especially important to mark symbols that may be confused with hyphens

Words and Phrases

Attention is called to the fact that the same information is  
 required from an editorial in the Boston

Due to the error in the original text, the following transcription is based on the visible content of the page, which appears to be a list of names and titles, possibly from a directory or a list of contributors. The text is heavily obscured and difficult to read, but the following is a transcription of the visible content:

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Hypothecate. This does not mean to pledge or mortgage.

The above is a copy of the letter from the  
 author to the editor of the "New York Times" dated  
 1914. The letter is a copy of the original letter  
 and is not a copy of the letter from the author to  
 the editor of the "New York Times" dated 1914.

1. The first part of the document is a list of names and addresses, which appears to be a directory or a list of contacts. The names are written in a cursive script, and the addresses are listed below them.

The first of these is the fact that the  
 second of these is the fact that the  
 third of these is the fact that the  
 fourth of these is the fact that the  
 fifth of these is the fact that the  
 sixth of these is the fact that the  
 seventh of these is the fact that the  
 eighth of these is the fact that the  
 ninth of these is the fact that the  
 tenth of these is the fact that the

1. The first part of the document is a letter from the President of the United States to the Congress, dated January 3, 1862. It is a copy of the original, and is signed by the President.

scientists, particularly to those of foreign countries since they are not translatable. They are the mark of the careless and uncultured person.

A number of these terms are given here, with the correct words following.

<i>Jargon</i>	<i>Correct Term</i>
acute abdomen	acute condition within the abdomen
alcoholic (as noun)	alcoholic addict, person with alcoholism
Ammon's horn	cornu ammonis
cardiac cardiac patient	patient with cardiac disease
cardiac diet	diet for patients with cardiac disease
chronic appendix	chronic appendicitis
chronic ear	chronic otitis
diabetic (as noun)	person with diabetes
epileptic (as noun)	person with epilepsy
flu	influenza
jugular ligation	ligation of the jugular vein
lues,luetie	syphilis syphilitic
milligrams per cent	milligrams per hundred grams [or] other unit
multip	multipara
neisserian disease	gonorrhea
organ or structure is negative	organ or structure is normal
oviducts	fallopian tubes
pathology (in concrete sense)	pathologic change disease
postmortem (as noun)	autopsy, necropsy
prump	primipara
prostatic	patient with hypertrophy, inflammation or some other disturbance of the prostate gland
right heart	specify right auricle or right ventricle
right upper lobe	upper lobe of the right lung
serology	changes in the blood or serologic reactions of the blood or the spinal fluid
specific	syphilitic when that is meant
specific stomach	syphilis of the stomach
spinal fluid dynamics	dynamic pressure of spinal fluid
surgical (or operative) inter- ference	surgical (or operative) intervention
subtotal gastrectomy	partial gastrectomy
suspicious of	suggestive of
syphilitic (as noun)	person with syphilis
taboparesis	the tabetic form of dementia paralytica
upper abdomen	upper part of the abdomen
upper respiratory infection	infection of the respiratory tract
urine contained 4 plus al- bumin	urine gave a 4 plus reaction for albumin [or] urine contained albumin (4 plus)

Certain forms of phraseology become established in medical discussions so that they are easily recognized by the physician, but are ludicrous when written. Physicians frequently say that a patient was placed "on cannabis," "on hydrotherapy" or "on a diet." Probably most grammarians would sanction the last of these three phrases but would hesitate to approve the statement that the patient was "placed on cannabis." In such instances it is better for the writer to state that cannabis was prescribed in a certain dose, to be administered at certain periods in a certain manner. A physician may say, "I have had no experience with starvation in epilepsy." Obviously, he means that he has not tried the treatment of epilepsy by starvation of the patient. He will say, "I have had little experience with pneumothorax in tuberculosis," meaning that he has not attempted the use of this method in any case of tuberculosis which has come to his attention.

**Trite Usage.** Many a competent journalist has urged reporters to use words that say exactly what is meant and to avoid the diction that has become trite by overusage. A good reporter never says "Smith sustained an injury", he says "Smith was injured." He never writes that people were "joined in the holy bonds of matrimony", he says "they were married." It is unnecessary to say of a well known man that he is "well known" and, in any event, "widely known" is better than "well known." A dog is just a dog and not a "canine," exactly as a cow is a cow and not a "bovine." People begin various processes, they seldom "inaugurate" or "initiate" these affairs. A patient lives in Portland, he is not "located" in Portland. The body of a dead man is his "body" and not his "remains." Far too many sentences begin with the words "It is" and "There is."

**Case.** A case is an instance of disease, the totality of the symptoms and of the pathologic and other conditions, a patient in the human being afflicted. One continually finds in medical manuscripts such sentences as "The case had a fever," "Thirty cases were admitted to the hospital" and "The case was operated on." In the publications of the American Medical Association such usages are banned.

A less obvious confusion exists in the employment of "case" to designate the condition. While from the definitions of the word given in dictionaries it might be used in the narrow sense of an attack of a

disease, in which event it might be considered as the condition itself, such usage is likely to lead to constant shifting of the point of view, even within sentences or paragraphs. One might write, for instance "In the acute case the patient was admitted to the hospital." Obviously, a case which is acute includes only the actual disease and its symptoms, while a case in which admission to the hospital is made and records are kept must include far more—all the attendant circumstances. Thus the word would be used in two senses in the same sentence. To avoid such inconsistency, proper medical writing restricts the use of "case" to its broader meaning, as indicated in the preceding paragraph—an instance of disease, the totality of what is known about the patient, his condition and all the circumstances. Moreover, the concrete subjects with which one is dealing are the patient and his condition, and writing will be simplified and vivified if one refers to them specifically rather than to the abstract "case."

**Use of Abstract Words in a Concrete Sense** "A malignancy was removed," "The cytology was normal" and similar statements are found frequently in manuscripts. For many years it has been a policy of the American Medical Association Press to avoid the use of abstract words in a concrete sense. The suffix "ology," for instance, according to Webster means "a science or branch of knowledge", and to use a word with that ending to describe a tumor or a specific change in the tissue is illogical and inconsistent with the principles of good choice of words. "There was no pathology" is an outrageous sentence. One would not dream of saying "There was no ophthalmology," for instance. Another expression to be eradicated is "biopsy showed" or "revealed." It is of course the histopathologic examination and not the operation of performing a biopsy which showed what was present.

The following incorrect and correct sentences illustrate the principles that should be followed in the preparation and in the editing of manuscripts.

*Incorrect*

The growth proved not to be a malignancy

*Correct*

The tumor was not malignant  
The malignancy of the growth was not considered

<i>Incorrect</i>	<i>Correct</i>
There was no pathology	A pathologic condition was not found The pathology <sup>1</sup> of syphilis is worthy of much study
The morphology of the tissue was that of sarcoma	The structure of the growth showed it to be a sarcoma
The histology of the lesion was studied	The lesion was examined histologically (or microscopically)
The cytology was normal	The cells (or cell count or whatever specific features were noted) were normal
The patient presented a severe symptomatology	The patient had severe symptoms A knowledge of symptomatology aids the physician in diagnosis The symptomatology of tuberculosis is varied <sup>2</sup>
The etiology of the anemia shown by this patient was not known	In this case the cause of the lesions was not determined The etiology <sup>3</sup> of some diseases is still vague
Microscopy showed the changes to be well advanced	Microscopic examination revealed the nature of the tumor
Bronchoscopy was performed immediately	A bronchoscopic examination was made each week Treatment with the bronchoscope relieved the patient The development of bronchoscopy has aided the physician greatly
Ventriculography showed normal filling	A ventriculogram was made on several occasions Encephalography should be understood by every neurologist
Surgery seemed the only possible treatment for that patient	Surgical intervention was considered but was postponed (Title) Surgery of the Gallbladder <sup>4</sup>

**Dosage and Dose** "Dosage" means the administration of medicine in regular doses or the determination and regulation of the proper

<sup>1</sup> "Pathology" here means the part of the science of pathology that deals with syphilis

<sup>2</sup> "Symptomatology" here refers to the entire complex of symptoms known to be associated with tuberculosis

<sup>3</sup> "Etiology" here means the theories of the causation of the disease "Causation," however, would be better

<sup>4</sup> "Surgery" may be used in an instance such as this if the author wants to emphasize that he is dealing with the part of the entire field of surgery that concerns the gallbladder. Usually, however, "Surgical Intervention on the Gallbladder" is adequate

doses The amount of a medicament to be administered at one time is correctly termed the "dose" Such expressions as "administered in small dosage" or "dosage of 3 drops" are redundant and should be avoided, and the shorter and more concrete word "dose" should be employed

**Inject** The transitive verb "inject" means (1) to introduce a substance into or (2) to distend or fill with fluid by injection It is therefore incorrect to speak of "injecting a patient with arsphenamine" or of "injecting a rabbit with virus" One "gives the patient an injection" and "injects the virus into the rabbit" or "inoculates the rabbit with the virus" It is permissible, however, to say that one "injects the bronchi" or "injects the blood vessels of a cadaver" when one actually fills the structures with a contrast medium

**Temperature and Fever, and Analogous Expressions** To say that a patient had "no temperature" is incorrect "No fever" or "no elevation of temperature" may be used, although it is perhaps better to say that the temperature is "normal" or "higher than normal" or "subnormal" Better still, if the temperature is abnormal, it should be given in terms of the Fahrenheit or centigrade scale It is, moreover, incorrect to say that a patient had a "fever of 102° F", "temperature" rather than "fever" should be used

An analogous faulty usage occurs frequently with other words "Leukocytosis," for instance, means the *presence* of an abnormally large number of white cells in the blood It is undesirable, therefore, to speak of "leukocytosis of 15,000" instead of "a leukocyte count of 15 000" If an author wishes to emphasize the abnormal condition by the use of the word "leukocytosis," he may say that "leukocytosis was present (15,000 cells)" or that "there was leukocytosis the white cell count being 15 000"

Similarly, manuscripts frequently contain such expressions as "The glycemia increased from 90 to 125 mg per hundred cubic centimeters" and "There was hyperglycemia of 150 mg" These ideas would be expressed better as "The sugar content of the blood increased from 90 to 125 mg," "The sugar content was high, 150 mg per hundred cubic centimeters" or "There was hyperglycemia, the sugar content being 150 mg"



**Cystoscope, Obstetricate, Explore, Refract.** The following sentence appeared in a manuscript submitted for publication

It was decided that the patient should be explored with the expectation of finding an acute appendix

Such a decision once made, the surgeon did not hesitate, he explored his patient. Another surgeon was not so courageous

~~We~~ We have contemplated having some of our inoperable cases collapsed by thoracoplasty, but have delayed

And another physician, finding the English language rather inadequate for his purpose, perpetrated this monstrosity

In a case in which I obstetricated at birth

Such use of transitive verbs with illogical objects has no justification in the laws of grammar or in the usage of persons of even ordinary education. Even less justification exists for using ordinary common nouns as verbs which do not exist. Astronomers never telescope the sky, bacteriologists never microscope their slides, but urologists do not hesitate to cystoscope their patients. Far worse, however, is the use of proper names of scientists into verbs describing procedures that they have evolved or discovered. The bacteriologist who would not microscope his slides will "Schick" one patient and "Wassermann" another.

**Use of Adjectives as Nouns.** Some words, such as "juveniles," "adolescents," "adults" and "convalescents" which originally were pure adjectives and are still adjectival in form, have come to be accepted as nouns. In most instances, however, it is well to avoid the use of an adjective as a substantive, from the standpoint both of linguistic purity and of accuracy in medical terminology. "Sphenoid" and "ethmoid" are now listed in medical dictionaries as nouns designating the respective bones; their use in a similar way to indicate the sinuses, however, is not sanctioned and is misleading to the reader, who frequently is unable to determine which structure is meant. Neurologists frequently speak of "the sympathetic" or "the sympathetics." How much more informative it would be if in each instance some specific phrase, such as "the sympathetic nervous system," "the sympathetic

nerve supply of the area," "sympathetic nerve fibers" or "the cervical portion of the sympathetic trunk," were supplied<sup>1</sup> Use of the adjectives designating arteries, veins, nerves and muscles as substantives may cause a reader to puzzle, for instance, over whether an artery, a vein or a nerve is meant when an author speaks of "the iliac" or "the peroneal"

"The former" or "the latter" refers to one of two specific things just mentioned and therefore may be considered as having a specific "antecedent," making insertion of a noun in each instance unnecessary In the case of "the foregoing" and "the following," however, the exact thing referred to may not be as clear as it should be in scientific writing, so usually it is better to supply the noun which the author has in mind, as "the foregoing list" or "the following formula"

Some terms are so frequently used in various phases of medical practice that they become recognized as in good usage For instance, the industrial physician has employed the following terms so frequently that their use is permissible

accident proneness	labor union
case finding	occupational hazard examination
employee morale	plant supervision
employee union	union grievance
health audit	work stoppage
health examination	

In other phases of medical practice, other combinations have also been so frequently used as to be recognized as good form Here are some examples

blood cultures	lower back pain
blood plasma	skin flap
brain damage	skin reaction
brain injury	skull fracture
cataract extraction	urinary tract infection
lid margin	

**Adjectives Modifying a Word Other Than the One Qualified**  
Such expressions as "the right chest" and "the upper abdomen" are commonly used Since there is only one of each of these structures and the adjective really modifies an understood "side" or "part," the

phrases should be expanded to "right side of the chest" or "upper portion of the abdomen" or some equally accurate designation

A similar misuse of adjectives occurs in such phrases as "upper respiratory infection," which means and should be expressed as "infection of the upper part of the respiratory tract" Other undesirable phrases of this type are

right heart	for	right side of the heart (specify right ventricle or right auricle)
cardiac diet	for	diet for patients with cardiac disease
jugular ligation	for	ligation of the jugular vein
facial paralysis	for	paralysis of the facial nerve, when that is meant
left lower lobe	for	lower lobe of the left lung

Further illustrations are included in the list of examples of medical jargon on page 43

**Group and Type** A favorite of many physicians is the word "group" An author may divide his patients into "groups" on the basis of age, again on the basis of the type of disease presented and finally on the basis of the results obtained In many instances confusion may be avoided by using other terms, such as "series" and "subgroup," to distinguish the divisions concerned

The use of "group" in the sense of "type," however, as in the phrase "this group of sarcoma," should be avoided not only because of vagueness but also because of inaccuracy Funk and Wagnalls' "New College Standard Dictionary" gives 8 definitions of "group" and Webster gives 12, but none of them justifies this use of the word Frequently an author says after a sentence has been questioned that he means a group of cases of a particular type of tumor, but he did not bring this out in the manuscript The following examples of correct usage should be considered carefully

In the first group of cases sarcoma of the spindle cell type occurred

This type of growth belongs to the lymphoblastoma group (that is, a group of several related structures all of which are lymphoblastomas)

The type of lymphoblastoma under consideration is interesting

Carelessness in writing and in organization of material is evident when, for instance an author defines three groups of cases, numbered

1, 2 and 3, and then proceeds to speak of "the *patients* of group 1" or "the *tumors* of group 3"

**Indefinite Article Before the Name of a Condition** Idiom requires that one say "The boy had an eruption" "The patient had anemia," however, is preferable to "The patient had an anemia," for both clarity and brevity With the names of most conditions which are definite entities, "a" or "an" may be omitted to advantage

The plural forms of names of conditions, such as "anemias" and "toxemias," usually should not be employed in the sense of instances of the condition but should be reserved to designate types of the condition "The anemias that I have observed" might mean either "the forms of anemia that I have observed" or "the cases of anemia that I have observed" If the latter is meant, the fact is brought out by insertion of "cases of" or "instances of"

**Operate** A flagrant disregard of the rules of grammar is found in the deplorable misuse of the verb "operate" "Operate" is both a transitive and an intransitive verb, and its usage in the two forms is clearly defined in even the most elementary grammar "Operate" means, and is synonymous with, "work" The terms nearly always may be used interchangeably The surgeon who would hesitate to say "I worked this patient" says unblushingly "I operated this patient" This solecism is limited to the medical profession It is also limited to this country American surgeons who justify themselves by saying that general usage makes correct usage should realize that "operate" is a word in general use wherever the English language is spoken, and that members of other professions and trades use it correctly Even if this misuse of the verb "operate" were not limited to medicine, good usage is the usage not of the careless minority but of the educated majority The pity of it is that some teachers in medical schools—professors of surgery—instead of setting an example to their students in the proper use of this verb, are responsible for the spread of its improper use

**Milligrams Per Cent** Results of chemical determinations frequently are expressed as "milligrams per cent" or "grams per cent" This means literally "milligrams (or grams) per hundred milligrams (or grams)," which in most instances is not the information that the author wishes to convey To insure accuracy a writer should specify

the unit used, such as "milligrams per hundred cubic centimeters" or "milligrams per hundred grams." If a number of values are given close together in a section or in a short paper, it usually is sufficient to supply "per hundred cubic centimeters" the first time the phrase appears and to use merely "milligrams" (not "milligrams per cent") thereafter.

**Findings and Found** An autopsy or a histologic examination of tissue is in most instances a systematic study of organs and tissues for the purpose of learning what changes, if any, have taken place. It is preferable, therefore, to speak of the conditions "observed," "seen" or "noted" rather than of those "found," and to refer to "observations" rather than to "findings." In the publications of the American Medical Association Press this distinction is observed, except perhaps in instances in which a search for a specific element is being made and the element is therefore actually found, as is frequently true in microscopic studies of blood and of cultures.

The word "findings" is in general overworked. If an author will look over a paper to see how often he has mentioned "findings" and in how many instances something more specific could have been substituted, he frequently will be surprised and will be able to make his report more informative.

**Histologic and Histopathologic** Some writers have acquired a habit of using 'histopathologic' to the exclusion of the briefer word 'histologic.' There may be instances in which the idea of disease or of a relation to the science of pathology that is expressed by "-patho-" gives additional information. If it is known, however, that the tissues examined are from a tumor or are part of a body under the influence of a general disease, 'histologic examination' or "the changes observed histologically" is adequate.

**Developed** According to the "Pocket Oxford Dictionary," the verb "develop" means "bring or come from a latent or rudimentary or immature state to visibility or activity or greater elaboration or size or completeness." Other dictionaries agree. It is obviously incorrect, therefore, to say that a patient "developed a tumor," for he did not bring it into being. When "develop" is used with reference to the origin of disease, it must be employed in its intransitive sense, as in the

sentence "The disease developed in this patient when he was 6 years old"

**Biopsy** Biopsy is an examination of tissue, it therefore is not correct to speak of "taking a biopsy" One "takes a specimen for biopsy" or, less formally, "takes a biopsy specimen" Likewise, one does not "remove tissue at biopsy," nor does one "inflict a wound at biopsy", the injury occurs during "removal of tissue for biopsy" It is redundant to speak of "biopsy examination"

## VAGUE AND INACCURATE TERMS

**Ambiguous Pronouns** Confusion is caused by careless use of pronouns It often is impossible to tell when an author is referring to himself and when to some other person or persons He may refer to himself in one place as "the writer," in another as "I" and in still another as "we" He may then use the pronoun "we" with reference to the medical profession or to people in general The use of the first person singular ("I" or "me"), which has been adopted by this press, is the clearest and most satisfactory usage

In a supplement to the *Lancet*<sup>3</sup> it was stated

The first person singular—the naked *I*—is no longer thought immodest Elaborate garments such as *we* and *the author* do not disguise a writer's identity unless they also disguise his meaning and medicine has no need of such aids to ambiguity

When an author is reporting work done in conjunction with others, it is proper for him to use the pronoun "we," provided he states who are represented by the "we," so that the reader will not be confused When reference is made to one of two or three joint authors, the correct form is "one of us," with either the initials or the name in parentheses if the authors wish it

The use of "the writer" or "the author" when the author of the paper means himself often makes it difficult to tell whether the author of the paper or another author just referred to is meant, and such usage is not permitted in the periodicals published by the American Medical Association In impartial reviews of the literature, in which

<sup>3</sup> On writing for the *Lancet* *Lancet* Jan 2 1937 supp p 1

the author ■ abstracting earlier papers by himself, alone or in collaboration with others as impersonally as reports by other physicians, it is permissible for him to say "Jones and Brown reported       " instead of "Brown and I reported       " if awkwardness ■ avoided by use of this form

As an example of the difficulty occasioned by improper use of the word "we," the following incident is cited

An author used the plural pronoun all through his paper. One sentence originally read

Feeling as we do we have ceased to employ it unless for some exceptional reason

This was changed to

The hospital staff has ceased to use radium unless for some exceptional reason

The author in going over his proof made the sentence read

Personally we have ceased to use radium unless for some exceptional reason

The manuscript editor, anticipating trouble, spoke about this when the proof was returned and suggested that the statement might read

Radium ■ no longer used in the clinics at the New York Post Graduate Medical School and Hospital

This suggestion was not put into type but was submitted to the author for his approval with a letter relative to the use of the plural pronoun saying

As you will notice we have made a *suggestion* on the last galley to obviate the use of the plural pronoun

He apparently took offense at this suggestion for modifying the sentence, for in his letter returning the proof he said

*I refer particularly to the end of the article where you have made a decided change in the wording. You have also caused me to state what is not correct (the fourth paragraph from the end) when you substitute "is no longer used in the clinics at the Post Graduate Hospital"*

The author finally changed the sentence to read

Personally I have ceased to use radium

The use of the pronoun "you" when physicians in general or people in general are meant is also confusing

In reports of meetings of societies "we" and "you" may be used to refer to the members

**Overworked Phrases.** Certain locutions are likely to become established as a part of the vocabulary of the physician. Such phrases as "the examination revealed," "the microscope showed," "significant observation," "points out," "unexplored fields," "throws light," "symptom complex," "so-called," "suffered from the disease" (meaning "had"), "complains of the disease" and "interesting and instructive" are so frequently used by authors that they are likely to pass over them even after five or six readings of their manuscripts. A special revision should be planned to eliminate overworked phrases.

**Superlatives—Very, Quite, Marked, Great.** Physicians and scientists frequently seem to find difficulty in expressing comparative size or comparative degrees of severity of illness, hence such words as "very," "quite," "marked" and "great" are used to excess.

The use of "very" was discussed by Franklin P. Adams in the *New York Tribune*. He said

Years ago this Pisa of Puristics, buttressed by Mr. Gelett Burgess, offered a prize for an instance of the adverbial use of 'very' that made the qualified word stronger. As we recall it, "Very Good, Eddie" and "the Very Reverend Somebody" were the only offerings. The use of 'very' in speaking or writing is a confession of verbal poverty and mental indolence.

The true meaning of "quite" is "completely." The use of the word in the sense of "considerably" is designated as colloquial (United States) in the "Pocket Oxford Dictionary" and in the "Standard Dictionary" and as loose or erroneous by Webster. Moreover, "The skin was quite red" tells the reader no more than does "The skin was red."

When "quite" (except in its strictly correct sense) or "very" appears in an article accepted for publication in one of the periodicals of the American Medical Association, the word usually is deleted by the manuscript editors.

In an editorial in the *Archives of Dermatology and Syphilology*,<sup>6</sup>

<sup>6</sup>The careless writing of medical authors. editorial, *Arch. Dermat. & Syph.* 3:421 (April) 1921.



Dr William Allen Pusey, then and for many years its editor, presented the following discussion of the use of the word "marked"

The too frequent use of the participial adjectives marked or pronounced when the writer means great large distinct appreciable moderate considerable extreme intense or some other quality that he could easily with a little thought express accurately by means of a descriptive word, is perhaps the most frequent fault. Marked used in this indefinite sense was found four times in two short consecutive paragraphs in a manuscript written by an academic graduate of one of our famous colleges. The adverb quite is used in the same way sometimes it is used as a diminutive adverb as quite frequently for occasionally or to express all degrees of qualification from slightly to completely. His mentality was quite low for His mental ty was extremely low. The great objection to the loose use of such words as marked and quite is that the words when so used do not indicate accurately what qualifications the writer means.

On this subject Charles A. Mercier<sup>7</sup> wrote

It is to be regretted that we have never adopted the admirable proposal of Dean Swift to keep all adjectives under lock and key and issue them to writers only on payment of a heavy fee. Certain words are so shockingly overworked by medical writers as to call loudly for a Society for the Prevention of Cruelty to Adjectives. It would be invidious to quote from any individual writer to illustrate a vice so generally prevalent and therefore I will disguise the reference by altering the disease but *mutatis mutandis*. I recently read in your columns an account that ran much as follows: A marked erythema was followed by a marked ulceration with a markedly sinuous edge which spread with marked rapidity and developed a marked discharge having a markedly purulent character increased to a markedly large size and was accompanied by a marked enlargement of the lymphatic glands. Treatment brought about a marked improvement with marked rapidity and the ulcer healed leaving a markedly thickened scar which became the seat of marked keloid.

**Above and Below** In preparing copy for publication it is well to avoid the use of the words 'above' and 'below,' for one cannot know just where a passage will come on the printed page. The paragraph referred to as "above" may fall at the bottom of one page, and the one in which it is mentioned, at the top of another. The difficulty may be avoided by use of such a term as "mentioned," "previously mentioned" or "aforementioned," or by referring to the heading or subheading of the section in which the statement cited appears.

<sup>7</sup> Mercier, Charles A. How medical writings may be given a marked development. *Brit. M. J.* 1 768 (May 20) 1916.

**Et Cetera.** "Et cetera" or "etc" should not be used in scientific articles, since the term conveys little if any idea of what was in the mind of the person who used it, and the manuscript editor usually is not able to substitute anything more specific. When "etc" follows "such as" or "for instance," it is superfluous.

**Bilious.** There was a time when anyone who was a little peaked and whose gastrointestinal tract was somewhat upset was characterized as "bilious." The term is a complete misnomer, since it does not refer to any actual disease. Scientific physicians have discarded it entirely.

**Eczema.** To the average layman, any disease of the skin is "eczema." Unfortunately, dermatologists themselves have fought over the term for many years. The word "eczema" refers to a certain type of reaction in the skin, as do the terms "urticaria," "erythema multiforme" and "erythema nodosum." The latter are definite types of reaction, due to numerous causes or often to unknown causes. A profuse number of dermatologic papers are concerned with the nature of eczema or eczematous types of eruption.

**Neurasthenia, Psychasthenia and Hysteria.** These terms are commonly used by the layman, together with "nervous breakdown," to describe any temperamental or mental disturbance. To the physician, they should indicate definite conditions.

**Strain and Sprain.** Some physicians refer to any disturbance in a muscle or a ligament as a strain, when in reality it is sometimes a sprain. These terms are ambiguous, since the exact condition constitutes a rupture of the tissues or perhaps a dislocation. The terms "strain" and "sprain" seem to be without exact significance.

**Infection vs. Inflammation.** When the body is invaded by bacteria, it is infected. When any portion of the body suffers irritation from any cause, bacterial or otherwise, it responds by becoming red, swollen and hot, this reaction is inflammation. The two terms are commonly used interchangeably without any conception as to their actual meaning.

**Rheumatism.** The use of this word as a designation for any pain is not justified. It is misused particularly with reference to the disease known as arthritis, which is inflammation of a joint.

**Asthma.** The term "asthma" commonly is used to designate any disease in which there is shortness of breath. Actually, shortness of breath may result from one of many causes, including a disease known as bronchial asthma. The correct term for shortness of breath is "dyspnea."

### PREFERRED USAGES

Among other usages which frequently appear in medical writings and which, while not incorrect, in some instances are susceptible of improvement are:

<i>Word or Phrase</i>	<i>Preferred Usage</i>
adrenalin	epinephrine
affection (except in the special neurologic sense)	disease
agranulocytosis	granulocytopenia
all of	all
cane sugar	sucrose
carbon dioxide snow	solid carbon dioxide
casualty	wounded person
colored	Negro
cure (meaning treatment)	treatment (these words are not interchangeable)
deep roentgen therapy	high voltage roentgen therapy
doctor	physician
enteric fever	typhoid
functionating	functioning
general paresis, general paralysis, parietic dementia	dementia paralytica
Graves's disease, Basedow's disease	exophthalmic goiter
gut, guts*	intestine, intestines
Hebrew, Israelite	Jew, Jewish
hemeralopia	day blindness
humans	human beings, man
hypertension, essential	hypertensive vascular disease
hyphema	hyphema (indicating hemorrhage of the eye)
hypodermatic	hypodermic
in extremis	moribund, dying
individual	person
insanity	mental disease
leukocytic count	leukocyte count

\* "Gut" is used in embryology

Word or Phrase	Preferred Usage
lymph gland	lymph node
male, female	boy or man, girl or woman
medical men, men	physicians (or dermatologists, neurologists or some other specialists)
microphotograph	photomicrograph
milk sugar	lactose
mongolian, mongoloid (as noun)	person with mongolism
nyctalopia	night blindness
pediatrist	pediatrician
physiotherapist	physical therapist or physiatrist
physiotherapy	physical therapy
polynuclear (when referring to leukocytes)	polymorphonuclear
proven (archaic)	proved
remarks (in heading)	comment, observations
round celled tumor	round cell tumor
sacrificed	killed
Scharlach R	scarlet red
skiagram	roentgenogram
spotted fever	specific disease meant, such as typhus or cerebrospinal meningitis
suprarenal	adrenal
therapist	therapeutist
treponeme	spirochete
tumor mass	tumor
ultraviolet light	ultraviolet rays
x ray picture	roentgenogram
x rays (except when the apparatus is meant)	roentgen rays

**Foreign Phrases** From the time when the mark of the physician was his ability to discourse fluently in Latin, certain Latin phrases have filtered into medical discussions with a frequency that resembles the manner in which *Bacillus subtilis* may contaminate pure cultures of virulent germs. Terms frequently abused are *pari passu*, *a priori*, *per se*, *in extenso*, *per os*, *in extremis* and *exitus letalis*. How much better to say simply, "The patient died" than to indicate his passing to immortality by a Latin route.

Other foreign terms frequently used are *per contra*, *ad lib* and *sub judice*. Such terms may be used but should be avoided when possible.

In the publications of the American Medical Association Press a translation of foreign quotations usually is included. When an author

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doctor	physician
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functionating	functioning
general paresis    general paralysis	dementia paralytica
paretic dementia	
Graves's disease    Basedow's disease	exophthalmic goiter
gut    guts*	intestine, intestines
Hebrew    Israelite	Jew    Jewish
hemeralopia	day blindness
humans	human beings, man
hypertension, essential	hypertensive vascular disease
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in extremis	moribund    dying
individual	person
insanity	mental disease
leukocytic count	leukocyte count

\* Gut is used in embryology

Marie-Foix and Klippel-Weil While it is historically interesting to have a sign, test, reaction or disease known by the name of its discoverer, it is in the interest of scientific medicine to use a descriptive term. Certainly "reflex rigidity of the pupil" is better than "the Argyll Robertson pupil", "great toe reflex" is preferable to "the Babinski sign", "exophthalmic goiter" is more descriptive than "Basedow's disease". When a discovery is credited to several writers, the matter becomes complicated by the fact that national pride may assign a different name to the disease in several different countries. What is known in England as "Graves's disease" is called "Basedow's disease" on the Continent except in Italy, where it is known as "Flajani's disease".

In some instances, nevertheless, a condition of disease may be recognized as an entity before its nature is sufficiently well defined to permit choice of an accurately descriptive name. "Hodgkin's disease," for instance, is at present preferable to "lymphogranuloma," "lymphogranulomatous," "infectious granuloma" and other synonyms that have been proposed.

The following table of eponymic diseases is quoted from the "Standard Nomenclature of Disease and Operations".\*

- Abram's disease *See* Hemolytic icterus acquired 252 (9)  
 Acosta's disease *See* Hypobaropathy 113 (4)  
 Adams Stokes syndrome *manifestation* 246 *Diagnose disease e.g.* Arteriosclerotic heart disease, 228 (5 0)  
 Addison's anemia *See* Anemia pernicious 249 (7)  
 Addison's disease *See* Tuberculosis of adrenal gland with cortical hypofunction 454  
     (1) Adrenal cortical hypofunction, adrenal disease undetermined, 455 (7)  
 Adie syndrome *See* Encephalomyelopathy of unknown origin, 464 (1) *manifestation* 521  
 Albers-Schonberg disease *See* Osteopetrosis (marble bones) 144 (0)  
 Albright's disease *See* Osteitis fibrosa cystica 150 (7)  
 Alzheimer's disease *See* Presenile sclerosis 101 (7) 480 (7)  
 Aran-Duchenne muscular atrophy *See* Duchenne-Aran muscular atrophy  
 Argyll Robertson pupil *See* Paralysis of intrinsic muscles of eye 517 *and* Reflex rigidity of pupil 519  
 Arnold-Chiari syndrome *See* Caudal displacement of brain stem, cerebellum and spinal cord 461 (0)

\* The Standard Nomenclature of Disease and Operations is now published by The Blakiston Company for the American Medical Association. The next revision of the Nomenclature will be ready for distribution about 1950.

- Arthus' phenomenon *See* Anaphylactic reaction, generalized, 110 (3), and Anaphylactic reaction, local, 118 (3)
- Avellis paralysis *See* Paralysis, ambiguospinothalamic, 518, 521
- Ayerza's syndrome *See* Syphilis of pulmonary artery, 237 (1), Dilatation of pulmonary artery due to mitral stenosis, 238 (6), Hypertension of lesser circulation due to disease of lungs, 237 (4), Arteriosclerosis of lesser circulation, 238 (9)
- Babinski-Nageotte syndrome, 522
- Baker's cyst *Diagnose* Popliteal bursitis under Bursitis due to unknown cause, 165 (9)
- Bamberger-Marie disease *See* Marie-Bamberger disease
- Banti's disease *See* Splenomegaly of undetermined origin, 256 (y)
- Barcoo disease *See* Veldt sore, 136 (9)
- Barlow's disease *See* Scurvy, 115 (7)
- Barré-Guillain syndrome *See* Guillain-Barré syndrome, 522
- Basedow's disease *See* Toxic diffuse goiter, 445 (9)
- Baumgarten-Cruveilhier cirrhosis *See* Cruveilhier-Baumgarten cirrhosis
- Bazin's disease *See* Tuberculosis indurativa (erythema induratum), 127 (1)
- Bechterew's disease *See* Arthritis, rheumatoid, of spine, 155 (1)
- Bell's palsy *See* Neuropathy of facial nerve due to pressure, 504 (4), or Neuropathy due to undetermined cause, 506 (y)
- Benedikt syndrome *See* Paralysis, mesencephalic, tegmental, 518, 521
- von Bergmann's hypopituitarism *See* Juvenile hypopituitarism, 451 (7)
- Bernard-Horner syndrome *See* Horner syndrome
- Bernhardt's disease *See* Meralgia paresthetica, 504 (4)
- Besnier-Boeck disease *See* Sarcoidosis, generalized, 109 (1)
- Best's disease *See* Degeneration, macular, congenital, 550 (0)
- von Bezold's abscess *See* Subperiosteal abscess of temporal bone, 601
- Bielschowsky-Jansky disease *See* Amaurotic familial idiocy, late infantile, 463 (7)
- Biermer's disease *See* Anemia, pernicious, 249 (7)
- Boeck's sarcoid *See* Sarcoidosis, generalized, 109 (1), Sarcoidosis of region, 117 (1), Sarcoidosis cutis, 127 (1)
- Bornholm disease *See* Pleurodynia, epidemic, 205 (1)
- Bouillaud's syndrome *See* Rheumatic fever, 109 (1)
- Bouveret's syndrome *See* Auricular paroxysmal tachycardia due to unknown cause, 224 (x)
- Bowen's disease, 134 (8)  
     of lymph node, secondary, 260 (8)  
     of mouth, 264 (8)  
     of nasal mucosa, 178 (8)
- Breda's disease *See* Yaws, 110 (1), 126 (1)
- Bright's disease *See* under Nephritis
- Brill's disease *See* Typhus, 110 (1)
- Brown-Séquard syndrome, 521
- Buerger's disease *See* Thromboangitis obliterans, 233 (9)
- Buschke's scleredema *See* Scleredema adultorum, 136 (9)

- Calvé Perthes disease. *See* Legg Calvé Perthes disease
- Carrión's disease. *See* Oroya fever, 109 (1) or Verruga peruana, 127 (1)
- Cestan syndrome, 522
- Cestan-Chenais paralysis. *See* Paralysis, medullary, tegmental, 518
- Chagas' disease. *See* Trypanosomiasis, American, 110 (1)
- Charcot joint. *See* Neurogenic arthropathy, 161 (5 5)
- Charcot's syndrome. *Diagnose* Angiospasm of arteries of leg and foot, 232 (5 0)
- Charcot-Marie-Tooth disease. *See* Progressive neuropathic (peroneal) muscular atrophy, 497 (9)
- Cheadle's disease. *See* Scurvy, 115 (7)
- Chenais-Cestan paralysis. *See* Cestan-Chenais paralysis
- Chiari-Arnold syndrome. *See* Caudal displacement of brain stem, cerebellum and spinal cord, 461 (0)
- Christian-Schüller disease. 114 (7)
- Christian-Weber disease. *See* Nodular, nonsuppurative panniculitis, 126 (1)
- Clark's paralysis. *See* Paralysis, cerebral, infantile, 518
- Clarke-Hadfield syndrome. *See* Pancreatic infantilism, 327 (0)
- Claude syndrome, 522
- Coats's disease. *See* Retinitis exudativa, 553 (5 0)
- Colles' fracture, 148 (4)
- Cooley's anemia. *See* Familial erythroblastic anemia, 250 (9)
- Costen's syndrome complex. *See* Impaired hearing due to malocclusion of temporomandibular joint, and Otalgia due to malocclusion of temporomandibular joint, 589 (6)
- Crohn's disease. *See* Ileitis, regional, 304 (9)
- Crouzon's disease. *See* Hypertelorism, 143 (0)
- Cruveilhier's disease. *See* Progressive myelopathic muscular atrophy, 511 (2)
- Cruveilhier-Baumgarten cirrhosis. *See* Cirrhosis of liver, congenital, 115 (1)
- Curling's ulcer. *See* Duodenal ulcer due to burns, 301 (4)
- Cushing's disease. *See* Changes in bone associated with pituitary basophilism, 451 (7) Adrenal cortical hyperplasia, 451 (7)
- Dana-Putnam syndrome. *See* Putnam-Dana syndrome
- Darier's disease. *See* Keratosis follicularis, 124 (0)
- Darier-Roussy sarcoid. 136 (9)
- Darling's histiocytosis. *See* Histiocytosis, 110 (2)
- Déjerine-Landouzy atrophy. *See* Landouzy-Déjerine atrophy
- Déjerine-Roussy syndrome. 522
- Déjerine-Sottas neuropathy. *See* Progressive hypertrophic neuropathy, 505 (9)
- Dercum's disease. *See* Adiposa dolorosa, 114 (7)
- Devic's disease. *See* Optic neuroencephalomyelopathy, 447 (6)
- Dietl's crisis. *See* Angulation of ureter, 349 (6)
- Drevalov's ulcer. *See* Erosion of stomach, 292 (9)
- Dresbach's syndrome. *See* Sickle cell anemia, 212 (1)



- Duchenne-Aran muscular atrophy *See* Myelopathic muscular atrophy, 497 (9)
- Duhring's disease *See* Dermatitis herpetiformis, 135 (9)
- Dupuytren's contracture, 174 (9)
- Durand-Nicolas-Favre disease *See* Lymphogranuloma, venereal, 259 (1)
- Economo's disease *See* Encephalitis, epidemic, acute, lethargic type, 476 (1)
- Engman's disease *See* Dermatitis infectiosa eczematoides, 125 (1)
- Erb's dystrophy *See* Pseudohypertrophic muscular dystrophy, 169 (9)
- Erb's palsy *See under* Birth injury laceration of peripheral nerve, 501 (0)
- Erb's paralysis *See* Paralysis, syphilitic, spastic, spinal, 492 (1), Pseudohypertrophic muscular dystrophy, 169 (9)
- Erb-Goldflam disease *See* Myasthenia gravis, 168 (5 5)
- Lulenburg's disease *See* Paramyotonia congenita, 166 (0)
- Ewing's tumor *See* Angioendothelioma, 150 (8)
- Faber's syndrome *See* Anemia, hypochromic, 249 (7)
- Fahr-Volhard's disease *See* Arteriolar nephrosclerosis, advanced stage, malignant nephrosclerosis, 344 (5 0)
- Fallot, tetralogy of *See* Ventricular septal defect, pulmonary stenosis or atresia, dextraposition of aorta and hypertrophy of right ventricle, 211 (0)
- Fanconi's disease *See* Constitutional infantile anemia resembling pernicious anemia, 248 (0)
- Favre Durand-Nicolas disease *See* Lymphogranuloma, venereal, 259 (1)
- Feer's disease *See* Erythredema polyneuropathy, 505 (x)
- Feil Klippel syndrome *Diagnose* Deformity of bone, 144 (1), Tuberculosis of spine, 146 (1)
- Felty's syndrome *See* Rheumatoid arthritis, 155 (1)
- Fiedler's myocarditis *See* Acute isolated myocarditis due to unknown cause, 223 (9)
- Flajani's disease *See* Toxic diffuse goiter, 445 (9)
- Flatau-Schilder disease *See* Schilder's disease
- Fleischer-Kayser ring *See* Kayser-Fleischer ring
- Fordyce's disease of mouth *See* Sebaceous glands of mucocutaneous junction, aberrant, 124 (0)
- Fordyce-Fox disease, 135 (9)
- Foville syndrome, 522
- Fox-Fordyce disease, 135 (9)
- Francis disease *See* Tularemia, 110 (1)
- Frank's capillary toxicosis *See* Nonthrombopenic purpura, cause unknown, 243 (x)
- Fret's disease *See* Lymphogranuloma, venereal, 259 (1)
- Freiberg's infraction of metatarsal head *See* Osteochondrosis of head of metatarsal bone, 152 (9)
- Friederichsen-Waterhouse syndrome *See* Waterhouse-Friederichsen syndrome
- Friedreich's ataxia *See* Hereditary sclerosis, spinal form, 483 (9)
- Froehlich's syndrome *See* Sex infantilism with obesity (adiposogenital dystrophy), 451 (7)

- Fuchs' black spot *See* Choroidal changes in myopia, 541 (4)  
 Fuchs' conus *See* Conus, oblique, 556 (0)
- Garre's disease *See* Osteitis, sclerotic nonsuppurative, 145 (1)  
 Gaucher's disease, 114 (7)  
 Gee's disease *See* Celiac disease, 262 (x)  
 Gelineau's syndrome *See* Narcolepsy, 485 (x)  
 Ghon tubercle *See* Tuberculosis of lung, childhood type, 199 (1)  
 von Gierke's disease *See* Glycogenosis, 114 (7), 223 (7)  
 Gilford Hutchinson disease *See* Hutchinson-Gilford disease  
 Glisson's disease *See* Rickets, 115 (7)  
 Goldflam Erb disease *See* Myasthenia gravis, 168 (5 5)  
 Gowers' syndrome *See* Paroxysmal vasovagal attacks, 484 (x)  
 Gradenigo syndrome, 522 *See also* Extradural abscess involving petrous bone, 600  
 Graves' disease *See* Toxic diffuse goiter, 445 (9)  
 Gubler Millard paralysis *See* Millard Gubler paralysis  
 Guillain Barré syndrome, 522  
 Gull's disease *See* Atrophy of thyroid gland with myxedema, 445 (9)  
 Gull and Sutton's disease *See* Arteriosclerosis, generalized, 233 (9)
- Hadfield Clarke syndrome *See* Clarke Hadfield syndrome  
 Haff disease *See* Poisoning, general, with arsenic 111 (3)  
 Hallopeau's acrodermatitis *See* Acrodermatitis continua, 125 (1)  
 Hanot's disease *See* Hypertrophic cirrhosis, 321 (9)  
 Hansen's disease *See* Leprosy, 109 (1)  
 Haverhill fever, 109 (1)  
 Heberden's nodes *See* Degenerative joint disease multiple, due to unknown cause, 162 (9)  
 Hebra's disease *See* Erythema multiforme exudativum 135 (9)  
 Hebra's pityriasis *See* Pityriasis rubra, 136 (9)  
 Henle's warts *See* Hyalin formation in cornea (by endothelial cells) 533 (7)  
 Henoch's purpura *See* Nonthrombopenic purpura, cause unknown, 243 (x)  
 Herrick's anemia *See* Sickle cell anemia, 252 (9)  
 Hirschsprung's disease *See* Dilatation of colon, congenital megacolon, congenital, 305 (0)  
 Hodgkin's disease, 261 (9)  
 Hodgkin's disease of skin, 135 (9)  
 Hoffmann Werdnig syndrome *See* Hereditary familial spinal muscular atrophy, 497 (9)  
 Horner's syndrome, 522 *See also* Cervical sympathetic paralysis, 507 (4) Tinnophthalmos due to paralysis of sympathetic innervation, 528 (5 5)  
 Horton's syndrome *See* Histamine headache, 472 (5 5)  
 Hunner's ulcer *See* Interstitial cystitis with ulceration, 356 (9)  
 Huntington's chorea *See* Hereditary chronic progressive chorea, 483 (9)  
 Hurler's disease *See* I ipochondrodystrophy, 108 (0)

Hutchinson-Boeck disease *See* Sarcoidosis, generalized, 109 (1)

Hutchinson-Gilford disease *See* Progeria, 115 (7)

Hyde's disease *See* Prurigo nodularis, 136 (9)

Jacksonian epilepsy *See* Focal, motor or sensory, cortical seizures, 484 (x)

Jackson's veil or membrane *See* Peritoneal adhesions and bands, congenital, 330 (0)

von Jaksch's anemia *A more specific diagnosis is to be made*

Janet's disease *See* Psychasthenia, 104

Jansky-Bielschowsky disease *See* Bielschowsky-Jansky disease

Jensen's disease *See* Retinochoroiditis juxtapapillaris, 551 (1)

Kahler's disease *See* Myeloma, 250 (8)

Kaposi's disease *See* Xeroderma pigmentosum, 124 (0)

Kaposi's sarcoma *See* Multiple idiopathic hemorrhagic sarcoma, 134 (8)

Kayser-Fleischer ring *See* Pigment deposit in limbus, 534 (9)

Kienböck's disease *See* Osteochondrosis of lunate bone, 152 (9)

Klippel Feil syndrome *Diagnose* Deformity of bone, 144 (1), Tuberculosis of spine, 146 (1)

Koch-Weeks bacillus *See* Hemophilus influenzae, 62

Koch Weeks conjunctivitis *See* Influenzal conjunctivitis, 584 (1)

Köhler's bone disease *See* Osteochondrosis of navicular, 152 (9)

Korsakoff's psychosis, 100 (3)

Krabbe's disease *See* Diffuse, infantile familial cerebral sclerosis, 483 (9)

Kraepelin-Morel disease *See* Morel Kraepelin disease

Krukenberg's spindle *See* Melanosis of cornea, following uveitis, 530 (1), Melanosis of cornea, due to myopia 532 (4)

Krukenberg's tumor *See* Fibrosarcoma mucocellulare carcinomatodes, 414 (8)

Kümmell's disease *See* Compression fracture of vertebra, *under* Fracture, compression, 147 (4)

Kussmaul's disease *See* Periarteritis nodosa, 231 (1)

Laennec's cirrhosis, 321 (9)

Landouzy-Dejerine atrophy *See* Facioscapulothumeral atrophy, 169 (9)

Landry's paralysis *See* Myelitis, ascending, acute, 491 (1)

de Lange's syndrome *See* Dystrophia myotonica, 170 (9)

Launou's syndrome *See* Hypophyseal gigantism, 451 (7)

Laurence-Moon Biedl syndrome, 108 (0)

Leber's optic atrophy *See* Hereditary optic atrophy, 505 (9), 559 (9)

Legg-Calvé-Perthes disease *See* Osteochondrosis of capital epiphysis of femur, 152 (9)

Lewandowsky's disease *See* Tuberculid (rosacea like), 127 (1)

Leyden-Moebius' dystrophy *See* Progressive muscular dystrophy, 169 (9)

Lichtheim's syndrome *See* Dorsolateral spinal degeneration, 496 (7)

Little's disease *See* Cerebral spastic infantile paralysis, 475 (0)

Lobstein's disease *See* Fragilitas ossium, 143 (0)

Lorain syndrome *See* Dwarfism and infantilism, 451 (7)

- Ludwig's angina *See* Cellulitis of floor of mouth, 263 (1)
- Madelung's deformity *See* Radius, idiopathic progressive curvature of, 142 (0)
- Majocchi's disease *See* Purpura annularis telangiectodes, 132 (5 0)
- Marfan's syndrome *See* Arachnodactyly, 108 (0)
- Marie's sclerosis *See* Hereditary sclerosis, cerebellar form, 483 (9)
- Marie's syndrome *See* Acromegaly, 451 (7)
- Marie-Bamberger disease *See* Secondary hypertrophic osteoarthropathy, 149 (7)
- Marie-Strümpell arthritis *See* Arthritis, rheumatoid, of spine, 155 (1)
- Marie-Tooth disease *See* Charcot Marie-Tooth disease
- Ménière's syndrome, 599 (x), 522
- Merzbacher-Pelizaeus disease *See* Aplasia axialis extracorticalis congenita, 474 (0)
- Mikulicz's disease *See* Hypertrophy of salivary glands, 277 (9), Achrocytosis of lacrimal gland, due to infection, 580 (1), tuberculous, 580 (1), due to unknown cause, 583 (9)
- Millard Gubler paralysis *See* Paralysis, alternating, abducens, facial, hemiplegic, 517
- Milroy's edema *See* Familial hereditary edema, 137 (x)
- Mitchell's disease *See* Erythrometalgia, 232 (5 5)
- Moebius Leyden's dystrophy *See* Leyden-Moebius' dystrophy
- Monckberg's arteriosclerosis *See* Arteriosclerosis, medial, especially with calcification, 233 (9)
- Moon-Laurence-Biedl syndrome, 108 (0)
- Mooren's ulcer *See* Ulcer, rodent, of cornea, 530 (1)
- Morax-Axenfeld conjunctivitis *See* Conjunctivitis due to *Hemophilus duplex* (*Morax-Axenfeld bacillus*), 584 (1)
- Morel-Kraepelin disease *See* Dementia praecox, 102 (x)
- Morgagni's hydatid *See* Cyst of oviduct, congenital, 408 (0)
- Morquio's disease *See* Eccentro-osteochondrodysplasia, 143 (0)
- Morton's disease *See* Osteochondrosis of head of metatarsal bone, 152 (9)
- Morvan's disease *See* Syringomyelia, 496 (8)
- Nägele's pelvis, 434 (4)
- Nageotte Babinski syndrome *See* Babinski Nageotte syndrome, 522
- Nicolas-Favre-Durand disease *See* Lymphogranuloma, venereal, 259 (1)
- Niemann-Pick disease, 114 (7)
- Oguchi's disease *See* Night blindness, congenital (Japanese), 551 (0)
- Ollier's disease *See* Dyschondroplasia, 143 (0)
- Oppenheim's disease *See* Amyotonia congenita, 490 (0)
- Oppenheim-Urbach disease *See* Urbach Oppenheim disease
- Osgood Schlatter disease *See* Osteochondrosis of tuberosity of tibia, 152 (9)
- Osler Vaquez disease *See* Polycythemia, primary, erythremia, 250 (7)
- Paget's disease of bone *See* Osteitis deformans, 151 (9)
- Paget's disease of nipple *See* Carcinoma simplex of nipple, 140 (8)

- Parinaud's conjunctivitis *See* Leptotrichosis of conjunctiva, 585 (2)
- Parinaud syndrome, 522
- Parkinson's disease *See* Paralysis agitans, 483 (9)
- Parry's disease *See* Toxic diffuse goiter, 445 (9)
- Pelizaeus-Merzbacher disease *See* Merzbacher-Pelizaeus disease
- Pellegrini-Stieda disease *See* Calcification of medial collateral ligament of knee due to trauma, 156 (4)
- Perthes' disease *See* Legg-Calvé Perthes disease
- Peyronie's disease *See* Induration of corpora cavernosa, 368 (9)
- Pfeiffer's disease *See* Mononucleosis, infectious, 109 (1)
- Pick's (Friedel Pick) disease *See* Polyserositis, 335 (9)
- Pick-Niemann disease, 114 (7)
- Plummer-Vinson syndrome *See* Anemia, hypochromic, 249 (7), Anemia secondary to iron starvation, 252 (7)
- Poncet's disease *Diagnose* Arthritis due to infection, multiple tuberculous, 154 (1)
- Pott's disease *See* Tuberculosis of vertebra, 146 (1)
- Pott's fracture, 148 (4) *The criterion is disruption of the inferior tibiofibular joint. It is better to classify this fracture in accordance with the specific lesions present e.g., Fracture of tibia, internal malleolus, 147 (4), Fracture of shaft of fibula, lower third, 147 (4), Tear of inferior tibiofibular ligament, 158 (4)*
- Putnam Dana syndrome *See* Dorsolateral sclerosis, manifestation, 522 *Diagnose disease*
- Queyrat's erythroplasia, buccal, 134 (8), 264 (8), lingual, 134 (8), 268 (8), vulvar, 134 (8), 392 (8), of glans penis, 367 (8), of prepuce, 367 (8)
- Quincke's disease *See* Angioneurotic edema, 132 (5 5), 242 (5 5)
- Raynaud's disease, 232 (5 5)
- von Recklinghausen's disease *See* Neurofibromatosis, 135 (8)
- von Recklinghausen's disease of bone *See* Osteitis fibrosa cystica, generalized, 150 (7)
- Riedel's lobe *See* Lobulation of liver, abnormal, congenital, 318 (0)
- Riedel's struma *See* Thyroiditis, chronic, 445 (9)
- Ritter's disease *See* Dermatitis exfoliativa, 135 (9)
- Robert's pelvis, 435 (9)
- Roger's disease *See* Ventricular septal defect, localized, 212 (0)
- Rokitansky's disease *See* Acute yellow atrophy of liver, 321 (9)
- Roussy Darier sarcoid, 136 (9)
- Roussy-Déjerine syndrome *See* Déjerine Roussy syndrome, 522
- St Vitus dance *See* Chorea, 476 (1)
- Schamberg's disease *See* Dermatoses, progressive, pigmentary, 131 (5 0)
- Schaumann's syndrome *See* Sarcoidosis, generalized, 109 (1)
- Schulder's disease *See* Progressive subcortical encephalopathy, 483 (9)
- Schimmelbusch's disease *See* Cystic breast due to unknown cause, 139 (6)
- Schlatter-Osgood disease *See* Osteochondrosis of tuberosity of tibia, 152 (9)
- Schmorl's disease *See* Herniation of nucleus pulposus, cause unknown, 162 (9)

- Schonlein's disease *See* Nonthrombopenic purpura cause unknown, 243 (x)
- Schuller-Christian disease, 114 (7)
- Senear Usher disease *See* Pemphigus erythematosis 136 (9)
- Siemens syndrome *See* Defect congenital ectodermal, 123 (0)
- Simmonds disease *See* Hypopituitary cachexia 451 (7)
- Sottas Déjerine neuropathy *See* Dejerine Sottas neuropathy
- Spielemeyer Stock disease *See* Atrophy, retinal in juvenile amaurotic familial idiocy 555 (9)
- Spielemeyer Vogt disease *See* Amaurotic familial idiocy juvenile 463 (7)
- Sprengel's deformity *See* Scapula congenital elevation of 143 (0)
- Stahl's pigment line *See* Linea corneae senilis 533 (7)
- Sueda Pellegrini disease *See* Pellegrini Sueda disease
- Still's disease *See* Arthritis rheumatoid multiple 155 (1)
- Stock Spielemeyer disease *See* Spielemeyer Stock disease
- Stokes Adams syndrome *manifestation* 246 *Diagnosis disease* e.g. Arteriosclerotic heart disease 228 (5 0)
- Strumpell Marie disease *Diagnosis* Rheumatoid arthritis of spine *under* Arthritis rheumatoid 155 (1)
- Strumpell Westphal pseudosclerosis *See* Pseudosclerosis 483 (9)
- Sudeck's atrophy *See* Osteoporosis due to trauma 148 (4)
- Sutton and Gull's disease *See* Gull and Sutton's disease
- Sydenham's chorea *See* Chorea 476 (1)
- Tay's choroiditis *See* Drusen of choroid 542 (9)
- Tay Sachs disease *See* Amaurotic familial idiocy infantile 463 (7) Atrophy retinal in infantile amaurotic familial idiocy 555 (9)
- Tetralogy of Fallot *See* Ventricular septal defect pulmonary stenosis or atresia dextraposition of aorta and hypertrophy of right ventricle 211 (0)
- Thomsen's disease *See* Myotonia congenita 166 (0)
- Urbach Oppenheim disease *See* Necrobiosis lipoidica diabeticorum 133 (7)
- Usher Senear disease *See* Senear Usher disease
- Vaquez Osler disease *See* Polycythemia primary erythremia 250 (7)
- Vernet syndrome 522
- Villaret syndrome 522
- Vincent's angina 127 (1)
- Vincent's infection of larynx 185 (1) of bronchus 193 (1) of mouth 263 (1) of tongue 267 (1) of tonsil 281 (1) of lingual tonsil 282 (1)
- Vinson Plummer syndrome *See* Plummer Vinson syndrome
- Vogt Spielemeyer disease *See* Spielemeyer Vogt disease
- Volhard Fahr's disease *See* Fahr Volhard's disease
- Volkman's contracture *See* Contracture due to ischemia 168 (5 0)
- Vossius ring 545 (4)

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**Lymphogranuloma Venereum.** The American Medical Association, as well as the National Conference on Nomenclature of Disease, prefers the term "lymphogranuloma venereum" to "inguinal lymphogranuloma," "lymphogranuloma inguinale" or "lymphopathia venerea (um) "

This condition and its name should not be confused with inguinal granuloma (granuloma inguinale)

**-Derma, -Dermia.** Names of cutaneous diseases properly end in "derma" rather than in "-dermia " These words are of neuter gender (scleroderma circumscriptum)

**Mongolians, Mongoloids.** Some authors have objected to the term "mongolian idiot" because, they say, some of the persons affected have intelligence above the level of idiocy For this reason they have wished to use "mongolian" or "mongoloid" as a noun to replace "mongolian idiot " In addition to the undesirability of the use of an adjective as a noun, neither designation is accurate, for "mongolian" in its strict sense applies to a member of the Mongol or of a similar race and "mongoloid" connotes particularly the physical characteristics The difficulties seem to be avoided if one uses "mongolism" as the name for the condition and speaks of the persons affected as "persons with mongolism " (Though "mongolism" is preferable to "mongolian idiocy," the latter, as well as "mongolian idiot," may be used if an author wishes )

**Infection vs Infestation.** In accordance with the report of a specially assigned committee of the American Society of Parasitologists, the word "infection" is used with regard to bacteria, protozoa and helminths, while the word "infestation" is reserved for invasion by arthropods, including ticks, mites and insects

**-Emia Words** Usage among physicians and the definitions in medical and in general dictionaries show great inconsistency in the significance attached to words ending in "-emia" and prefixed by "hyper-" or "hypo-" Sometimes an "-emia" is considered as the presence of a substance in the blood, sometimes, as an excess, sometimes, even as an abnormally small amount Some authors always employ the prefix "hyper-" when they wish to state that an excess was present, others use the "-emia" word—for instance "glycemia"—alone



Waterhouse-Friederichsen syndrome See Meningitis, cerebrospinal, epidemic (meningococcic), 468 (1)

Weber's paralysis See Paralysis, alternating oculomotor, hemiplegic, 518

Weber-Christian disease See Nodular, nonsuppurative panniculitis, 126 (1)

Weil's disease See Jaundice, spirochetel, 109 (1)

Werdnig-Hoffmann syndrome See Hoffmann-Werdnig syndrome

Werlhof's disease See Thrombopenic purpura idiopathic hemorrhagic, 252 (7)

Wernicke's disease See Polioencephalitis, superior, hemorrhagic, 477 (1)

Westphal-Strumpell pseudosclerosis See Strumpell-Westphal pseudosclerosis

Whitmore's disease See Melioidosis, 110 (1)

Wilms' tumor See Embryonal carcinosarcoma of kidney, 345 (8)

Wilson's hepatolenticular degeneration See Hepatolenticular degeneration,

**Antepartum and Prenatal** In the periodicals published by the American Medical Association a distinction is made between the words "Antepartum" is used to refer to the mother before parturition, or to events or circumstances affecting her during pregnancy, "Prenatal," to refer to the fetus before birth.

**Epidemic Encephalitis** In order to avoid the confusion attending "epidemic encephalitis" to refer to all types of acute encephalitis, it is well to employ "lethargic encephalitis" or "epidemic encephalitis."

*Polio* *nella hirschfeldii*, to designate the disease originally described by Hirschfeld (1926), except when it differs from the types observed in *Pseudomonas jaegeri*, *Phytomonas* *Japan*.

The same rules apply to specific names. There have been many cases of this disease in women. These are written in the feminine when the name is in the substantival form (thus, *Clostridium luciliae*).

<sup>10</sup> General Systematic Bacteriology Monographs on Systematic Bacteriology, more Williams & Wilkins Co. 1925 vol. I

## 6

## Spelling

Spelling should be consistent, the writer should follow a definite style, preferably that adopted by the periodical to which he wishes to submit a manuscript. Some publications follow conservative spelling, others have adopted reformed spelling. The periodicals of the American Medical Association Press follow leading medical dictionaries such as "Blakiston's New Gould Medical Dictionary" and Dorland's "American Illustrated Medical Dictionary" for the terms which they contain and Webster's "New International Dictionary" for other words (except as they conflict with the rules given in this chapter)

Certain special usages have been adopted, as here listed<sup>1</sup>

abstracter	argentophilic (adj.)	chlorophyll
accommodate	arrhythmia	cholangitis
acinous	arsphenamine	cholesteremia
adaptable	artefact	cholesterol
adenosine	ascendant (noun)	cholesterosis
adiadokokinesis	bacteremia	choroid
admissible	basophilic (adj.)	cigaret
afterward	benefited	clue
aline	beside (by the side of)	cocaine
alinement	besides (in addition to)	-coccic (adj. ending)
alkali	blennorrhea	coccidioidal
alkalization	bougienage	combated
alkalize	bromide	confre
allotted	bromine	cooperation
amebicide	burr	criticize
ampul	calix	critique
anaerobic	calory	crystalline
analogous	calvaria	curet
ancylostoma	cannula	curettag
aneurysm	cantaloup	curettement
angitis	carotene	cyclothymic
ankylosis	catabolism	debride
appendectomy	centrifugation	defense
appendical	centrifuge (verb)	demyelinate

<sup>1</sup> A few words concerning the spelling of which there is no inconsistency have been included in the list because they are frequently spelled incorrectly in manuscripts

demyelination	hemopoietic	occurring
descendant (noun)	hiccup	oriental
desiccate	hilus	ophthalmology
devise* (verb)	homogenization	oxidase
diadokokinesis	homogenize	papilledema
dictitian	hyalin (noun)	pavaex
dilatation (state of being dilated)	hyaline (adj.)	pedicel ( <i>bot.</i> , stem)
dilation (act of dilating)	hypophysial	pedicle ( <i>anat.</i> , vertebral process, <i>med.</i> , stem of tumor)
diphtheritic	impracticable	penile
discernible	inoculate	periangitis
disk	insanitary	periarticular
dispatch	insure	pericholangitis
distention	intern	perilymphangitis
drachm	intrachondrial	perineural (around the nerve)
dulness	intravenous	perineurial (referring to perineurium)
embarrass	intussusception	perisinial
embed	ipsilateral	perivascular
embryos	lacrimal	peroxidase
employee	leukemia	phagocytose
enclosed	leukocyte	phlorhizin
endameba	lymphangitis	phosphorus
endochondral	lyophile	physicochemical (pertaining to physical chemistry or to physics and chemistry)
endorse	lyse*	physiochemical (pertaining to physiologic chemistry)
eosinophilic (adj.)	lysozyme	
epithelization	malpighian	
epithelize	mamilla	
exophthalmos	mamillary	
faker	mammary	
fantasy	marasmic	
fantom†	microgliocytes	
fiber	migraine	
fulfil	mold	
fulness	mosquitoes	
fungous (adj.)	mucopus	
fungus (noun)	mucous (adj.)	
gage	mucus (noun)	
glycosuria	multilocular	
gray	mycotic	
grip	myclinate	
guaiacol	myclination	
hemianopsia	myocardial	
	negligible	

\* Exception to rule

† When "phantom" is used in the sense of a model as in "phantom experiments," the "ph" spelling should be used

prodrome	rosette*	tintre* (of tone)
promoter	sagittal	uter
pruritus	Salpêtrière	tonsillitis
psychoanalysis	sanatorium	toward
pyoderma (localized patch)	scirrhus (adj.)	translator
pyoderma (general condition)	scirrhous (noun)	tubercular (nodular)
quinacrine (atabrine)	serviceable	tuberculous (pertaining to tuberculous)
radical (adj.)	[sic]	tuberous
radical (chem., group of atoms, philol., part of word)	sinal	unpractical
radicle (anat., root or rootlike structure)	skeptical	vacuolate
rale	skilful	vacuolation
raphe	sprue	venipuncture
reenforce	stable	ventrifixation
résumé	streptotrichal	verruca peruviana
rhythm	sulphydryl	verrucous
rime	sulfobromophthalein	villous (adj.)
role	supersede	vitamin
	technic	ward (suffix)
	thermostable	whisky
	thromboangitis	wilful
	thrombopenia	xanthophyll
	thrombopenic	

\* Exception to rule

## SIMPLIFIED SPELLINGS

The following simplified spellings, which have been approved by a committee of the editors of the publications of the American Chemical Society, have been adopted for the publications of the American Medical Association: *e* for *ae*, as in anesthetic, hemoglobin, *f* for *ph* in sulfur and the sulfur compounds, *f* for *gh*, as in draft, *el* for *ette*, as in pipet, *ze* for *se*, as in analyze, *l* for *ll* in words like distil (when the accent is on the last syllable the *l* is doubled in participles, as *distilled*, also in monosyllables, as *still*), *l* for *ll*, as in fulness, *e* for *oe*, as in pharmacopeia, *or* for *our*, as in behavior, *er* for *re*, as in fiber; and *mold* not *mould*, *gage* not *gauge*, and *role* not *rôle*.

For words ending in "*og*" or "*ogue*," the form listed as preferred in "Blakiston's New Gould Medical Dictionary" or in Webster's "New International Dictionary" is used. If the "*og*" and the "*ogue*" forms are given as in equally good usage, the "*og*" spelling is chosen.

## NAMES OF PERSONS

Special attention should be given to the spelling of names of persons. The American Medical Directory may be consulted for the names of physicians in the United States. Directories and lists of physicians of foreign countries are available in medical libraries. "Who's Who" may prove valuable. Names of well known investigators are found in medical dictionaries. When an article or a book is consulted and cited, the author's name should be copied correctly, special attention being given to the insertion of accents in a foreign name.

In the following list are a few names that are frequently misspelled

Bence Jones Henry	McCollum E V
Berkefeld	Metchnikoff
Darkshevich	Neelsen (Ziehl Neelsen stain)
de Fortuyn Droogleever	Pavlov
Déjerine	Rinne
del Río Hortega Pío	Šafár
Greifswald	Schick Béla
Kjeldahl	Shwartzman Gregory (Shwartzman phenomenon)
Korsakoff	Tallqvist
Kustner (Prausnitz Kustner reaction)	Van Gieson
Little E G Graham	Wassermann
MacCallum W G	

## GEOGRAPHIC NAMES

For the spelling of foreign geographic names the decisions of the United States Geographic Board<sup>2</sup> should be followed. When two spellings appear in the list, the anglicized form is preferred.

In the following list are a few geographic names which are encountered frequently in manuscripts

Berne (Switzerland)	Goteborg (Sweden)
Brussels (Belgium)	Leipzig (Germany)
Czechoslovak (adj.)	Liège (Belgium)
Czechoslovakia	Munich (Germany)
Danzig	Netherland (adj.)
Frankfort on the Main (Germany)	Netherland East Indies

<sup>2</sup> First Report on Foreign Geographic Names. United States Geographic Board. Washington, D. C. Government Printing Office, 1932.

Netherlands	San José (Costa Rica, Uruguay)
Prague (Czechoslovakia)	Scriba
Rumania	Yugoslavia
San Jose (Calif)	Zurich (Switzerland)

Other rules concerning geographic names will be found in the chapter entitled "Abbreviations"

## DIVISION OF WORDS INTO SYLLABLES

The American Medical Association Press follows the four rules established by Funk and Wagnalls for the division of words, namely

**Rule I.** A consonant or a digraph or trigraph between two vowels goes into the later syllable when the first vowel is long, half-long or obscure (except -er as in gen-er-al), as, fa-tal, sea-son, sepa-rate, pro-gram, seda-tive, omt-nous, mecha nism, pecu-liar, pro-phetic, medi-cal, practi-cal, fa-ther, me-tallic, mo-nopo-ly, pre-sent (v ), de throne, ca-pacity, pro gress (v ), ca-pable, proce dure

**Rule II.** A consonant between two vowels goes into the earlier syllable when the first vowel is short and has any stress, as, prod-uct, prog-ress (n ), rap id, pres-ent (n ), vis it, ton-ic, bus-y, crit-ic, proph-et, prophet-ic, cyn-ic, fath-om, flor-id, char-ity, sep-arate

**Rule III.** Adjoining consonants usually separate into two syllables, as, at-tract, con demn, pam-phlet, syl-lable, prac-tical, moun-tain, infan-try, connec-tion, produc-tive, detec-tive, suc ces-sor, defend-ant, cor respon-dent, as sis-tant, mat-ting, com-pel ling, fret-ted En-land

**NOTE** Doubled consonants ending a primitive word are kept together before a purely English suffix as, tell ing huss ing

**Rule IV** Purely English suffixes ( ed, er -est, -eth, -ing, ish, -y) are always kept distinct (except when the terminal letter of the primitive word is repeated, as in compel ling), as, heat-ed, hat-ed, bak-er, speak-er, speak est, wak-eth, search eth, hast ing, baptiz-ing brak-ing, break-ing, freak ish, head-y

**NOTE** Terminations like al, ant, ent, -ive, or are treated as merely anglicized endings (usually of Latin or Greek words taken into English entire, but with terminal change), not as separable English suffixes Thus such con fusion as music al, practi cal, conjunc tive, disjunct ive, abun dant, defend ant,

which is found in some other works, is avoided. The treatment here given makes every one of these terminations begin with the consonant

## HYPHENATION

The American Medical Association Press has adopted the policy that hyphens are not necessary when the meaning of double or compound words is clear without them. Some dictionaries use more hyphens than seem to be necessary for clearness.

A hyphen is not used with a prefix unless mispronunciation or ambiguity might result without it.<sup>2</sup> A prefix preceding a proper noun, as in "non-American," requires a hyphen. When "non" or "post" is followed by a word beginning with "n" (or an "n" sound) or "t," respectively, a hyphen should be used, as in "non-nitrogenous," "non-pneumatic" and "post-traumatic." Other prefixes ending in a consonant usually are joined without a hyphen to a word beginning with the same consonant. Occasionally one of the consonants is dropped. For the spelling of such words, the medical dictionaries mentioned or Webster's "New International Dictionary" should be consulted. A prefix of more than one syllable ending in a vowel should be hyphenated before the same vowel, as in "semi-isolated" and "hypo-ovarian," except in chemical or other pharmaceutical names. One should write "endoderm and ectoderm" rather than "endo- and ectoderm."

When two similar vowels come together in the name of a drug, the name is not hyphenated, as in paraamino benzoic acid. The prefix "co" when used to refer to an agent is hyphenated, i e, co-worker, co-author. When "co" refers to a state or condition, the word is written without a hyphen, i e, coexistent.

A few general rules governing the formation of compounds of certain types may be given. (These rules do not apply, of course, to words, such as "background," which have long been established as one word and are so listed in general dictionaries.)

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<sup>1</sup> . . . . .  
<sup>2</sup> . . . . .

1 Compounds the second member of which represents an agent, either a person or a thing, or a type of work are written as two words

behavior analyst	metal work
iron worker	needle carrier
lens cutting	

Exception proofreader, proofreading, pacemaker

2 Letters (designating shape or used with special significance) need not be joined with a hyphen to a following noun

beta streptococci	X zone
T tube	Y incision

Exception x ray

3 Compounds formed with "end," "back" or "side" are written as two words

back passage	end results
back pressure	side arm
end organ	side effects
end picture	side passage

Exception background

4 Compounds formed with "after" are hyphenated

after-effects
after-treatment

5 When "over" and "under" indicate degree, they are joined without a hyphen, when they indicate position, they are used as separate words

overexcitement	under side
overstimulate	under surface
undernourished	

6 "Cross" is used as an adjective or adverb and is not joined to a following word

cross immunization	cross passage
cross immunize	cross section

7 Combinations of "self" with a following word are not hyphenated unless they are used as compound adjectives preceding nouns

self adjusting	self respect
self evident	self adjusting bandage

8 "Pseudo" and "quasi" are considered as prefixes and are joined to single words without a hyphen. Before compound words they should be used as adjectives

pseudo diabetes insipidus
pseudoxanthoma
quasipsychiatric



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the hyphen

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back pressure	side arm
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after treatment

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cross immunize	cross section

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self adjusting	self respect
self evident	self-adjusting bandage

8 "Pseudo" and "quasi" are considered as prefixes and are joined to single words without a hyphen. Before compound words they should be used as adjectives

pseudo diabetes insipidus
pseudoxanthoma
quasipsychiatric

ice bag	near sight	rat bite fever
ice box	nearby (adj )	Rh factor (when it does not precede a noun)
ice pack	nerve head	roundworm
ice water	new growth	safety pin
ill health	newborn	Samoa pox
infra red*	no one	sand fly
intragroup	nose clip	school children
iron deficiency state	nose piece	seesaw
isamine blue	olive oil	setup
jawbone	oneself	sheep pox
joint disease	openmindedness	shellfish
keynote	operating room	short circuit
knee joint	orang-utan	short-cut (adj & v )
knock knee	osteoid-osteoma	short cut (n )
lactic acid bacillus	outdoors	shotgun
lantern slide	outpatient	sickroom
life-terminer	over-all	smallpox
lip rouge	overfeeding	so-called
lipstick	overnight (adj & adv )	so far as
live stock	pacemaker	sometime†
long-continued (adj )	pansinusitis	split pea
loud speaker	past pointing	standpoint
lunchroom	per cent	stillborn
lymph nodes	per cent hour	stopcock
makeup	pinhead	stopwatch
man power	pinpoint	subject matter
medicolegal	pinprick	sum total
meter candle	poison ivy	sun bath
methylene blue	poppyseed oil	surgeon general
micromilemeasurements	postcard	swimmers' itch
micromethod	post(mortem (adj pre- ceding noun)	symptom complex
microorganism	post mortem (other con- structions)	test tube
midbrain	postoffice	textbook
midline	postoperative	to wit
milliampere minute	printers' ink	today
millicurie hours	privatdozent	toe drop
milligram hour	product moment	toe nail
mother's milk	method	tomorrow
motion picture	pulse rate	tongue-tie
motorcar	quicksilver	tonight
mouth piece	radioactivity	transatlantic
nationwide		trypan blue
near point		

\* Exception to rule

† Often must be two words

tsetse fly	wartime (adj.)	widespread
tuning fork	water supply	worldwide
twenty odd	wavelength	worth while
twofold	well being	wrist drop
ultraviolet	wetnurse	wryneck
un American	whipworm	
vice president	whooping cough	

**Use of Hyphens in Compound Adjective Modifiers** Hyphens are not necessary in compound adjectives when the meaning and the relation of the double words are clear without hyphens. The principles to be set forth here are followed in the periodicals published by the American Medical Association Press, exceptions being made only when misunderstanding or confusion might arise.

When one of the elements of a compound adjective contains more than one word, an en dash should be substituted for the hyphen, as in "blood sugar-regulating mechanism," "anti-rabbit kidney" ("anti" modifies "rabbit kidney" not "rabbit"), "multiple sclerosis-like" and "aero-otitis media." It is well, however, to avoid such complicated combinations whenever possible.

The combinations that are hyphenated when used as unit modifiers preceding their nouns need not as a rule be hyphenated when used in other constructions, for instance as predicate adjectives, specific mention of the exceptions will be made at the end of this section.

The following types of compound adjectives do not require hyphens

1 Combinations of an adverb modifying an adjective or a participle

well established principles  
 ill defined methods  
 newly born infant  
 an almost cured lesion  
 a seldom performed operation  
 the best known book  
 little stressed complications  
 far reaching consequences  
 less evident manifestations  
 ever increasing importance

Exception so-called

2 Combinations of an adjective and a noun

connective tissue changes  
full term infant  
present day practice  
prickle cell layer  
slit lamp examination  
dark field examination  
low grade fever  
hanging drop culture  
old time customs  
round cell sarcoma  
wet ashing method  
worth while investigations

Exceptions a dull, lean ham color (to avoid confusion in meaning)  
old school physicians (to avoid confusion in meaning)

3 Combinations of a noun modifier and a noun

slide precipitation test  
complement fixation test  
roentgen ray dermatitis  
bone conduction time  
dextrose tolerance tests  
blood sugar values  
bundle branch block

Exceptions poppyseed oil  
cottonseed oil

4 Combinations of a cardinal numeral and a noun

one day period  
a 2 day old boy  
a two stage operation  
a two platform method  
two point discrimination  
a 14 week fetus

5 Combinations of an ordinal numeral and a noun

second grade pupils  
third grade material  
a third stage operation  
first class methods

6 Combinations in which the name of a color is modified by a descriptive noun or by an adjective, either descriptive or denoting a secondary color (A hyphen is needed, however, when two coordinate adjectives of color are used—see paragraph 10, page 86 )

bluish red lesions  
olive green lesions

deep blue lesions  
 slate blue lesions  
 silvery white lesions  
 crystal white lesions

7 Miscellaneous more complicated combinations

the dilution and concentration test  
 forward and backward movements  
 end to end anastomosis  
 a side to side connection

Exception up to-date methods (in dictionaries as and pronounced as a true compound word)

The following types of compound adjectives require hyphens

1 Combinations in which a noun is used as the object of the present participle of a transitive verb

habit forming drugs  
 skin sensitizing substances  
 blood sugar-regulating mechanism  
 blood-coagulating medium

2 Combinations of a participle with an adverb or a preposition

heaped up tissue  
 broken-off ends

3 Combinations of a noun and a participle

a breast fed infant  
 a dark adapted eye  
 time honored traditions  
 formaldehyde fixed tissue

4 Combinations of first or last or an ordinal numeral with a participle

the last mentioned author  
 the first published article  
 the first removed suture  
 the third born child

5 Combinations of long and a participle

long standing tuberculosis  
 long-established customs  
 a long-continued discharge  
 long maintained remissions

6 Combinations of two nouns used coordinately to modify another noun

calcium phosphorus ratio  
 the Biuret Simon test

*Spelling*

- 7 Combinations of two adjectives used coordinately to modify a noun  
toxic infectious dystrophy  
manic-depressive psychosis
- 8 Combinations of two adjectives or a noun and an adjective to modify a noun  
tenth normal hydrochloric acid  
all important principles  
stony hard lesions  
species specific reactions  
air tight room  
water proof bandage  
water resistant fabric  
Wassermann fast serum
- 9 Combinations of an adjective and a participle  
full grown rabbits  
double nucleated cell  
broad shouldered men  
American born children  
medium sized papules  
normal looking skin  
Exception newborn infant
- 10 Combinations of two coordinate adjectives of color  
blue black lesions  
yellow green discoloration
- 11 Combinations of a preposition and a noun  
under water therapy  
before treatment tests

The following combinations should be hyphenated in any construction in which they occur

- 1 Combinations of two coordinate adjectives  
The psychosis was considered to be manic depressive
- 2 Combinations of two coordinate nouns or adjectives of color  
The skin was blue black

### VARIANT ENDINGS OF ADJECTIVES

One of the reforms in spelling adopted by many medical publications is the elimination of the "al" ending on adjectives. This reform was first strongly emphasized by Dr. George M. Gould,<sup>4</sup> in 1896

<sup>4</sup>Gould G. M. Concerning medical language J. A. M. A. 26 1007 (May 23) 1896

"The incongruities of medical nomenclature," he said, "and the stock still standing of irrational conservatism lead one to wonder if we are ever to awaken to the need of philologic civilization

"One of my four kind critics once wrote me remonstrating, solely on the ground of euphony, against cutting the *al* off the tail end of adjectives . . . Either one thing or the other, if you refuse to say *hemie* and *theoretic*, then you must not say *scientific* and *hydrochloric*. If you make us say *chemical* and *theoretical*, then, like a sucking dove we will roar you for consistency and ask that you be *scientific*, or else we will prescribe *nitric* and *hydrochlorical* acid for your alarming *gastrical* torpor and obstinacy"

Dr. Gould submitted the following alarming example of the effects of carrying the "al" ending to extremes

**SOME SCIENTIFIC DIFFICULTIES** The patient was *ascitical* and *cyanotical*. had an *anemical* (*dicrotical* or *anacrotical*) murmur, *splanchnical* and *splenic* dullness was pronounced. Neither the *allopathical* nor the *homeopathical* consultants could determine whether the affection was of *extrinsical* or *intrinsical* origin, whether *anabological*, *katabological*, *atrophical*, *septicemical*, *lithemical*, *leucal*, *hemical*, *hemolytical*, *thermical*, *tabetical*, *hepatic* or *encephalic*. The specialists were called in and *laryngoscopical*, *ophthalmoscopical*, *gynecological* and *otoscopical* examinations were made. The *laryngoscopical* man said a *diphtherincal* membrane was forming, and the *phrenical* nerve was pressed upon. The next averred the difficulty was *esophorical* or *exophorical*, that a *blenorhagical* inflammation, perhaps a *rheumatical* *iritis*, existed. After an *endoscopical* examination the *gynecological* expert said *pelvical* (or *pubical*) disorder was present and a bad *cystical*, *spermatic* and *chorionical* state of affairs. The ear man claimed that the disease was *specifical*, that the *otical* ganglion was *syphilitical* and its condition *pathognomonical*. The *diagnostical* and *prognostical* difficulties were certes becoming most *prolifical*!

As to *therapeutical* measures one advised *cardiacal* and *tonical* treatment, another *hypodermical*. one thought *hydriatical* methods good, another *antiphlogistical*, while still another suggested *hypnotical* and *soporifical* agents. *Galvanical* and *faradical* electricity, as well as *statical* and *franklinical*, were advised. The surgeon after a *diagnostical* incision (under *anesthetical* precautions) spoke of a *plastical* operation. *Cautical* applications to the throat were considered good, and the exhibition of *prussical*, or of *borical*, *nitric* and *hydrochlorical* acids, perhaps also *carbolic* with *malical* and *acetical* acid drinks. The general physician thought *antincuralgical* and *antirheumatical* prescriptions sufficient, but the obstetrician would have added *oxytocical* ones.



The patient died of alcoholical parietal dementia, superinduced, it is thought, by despair at the orthographical and phonetical conservatism of progressive Americans

The following list represents the usages of such adjectives with variant endings adopted by the American Medical Association Press<sup>1</sup> The "ic" ending is preferable in practically all medical or other scientific words, whether or not they are included in this list (Exceptions to this general rule are italicized for ready reference)

aeronautic	dermatologic	hypodermic
alphabetic (pertaining to an alphabet)	dynamic	hypothetic
<i>alphabetical</i> (in the order of the letters of the alphabet)	economic (pertaining to economics)	<i>hysterical</i>
analytic	<i>economical</i> (thrifty)	immunologic
anatomic	elliptic	logical
anthropologic	embryologic	macroscopic
anthropometric	empiric	magic (pertaining to magic)
<i>arithmetical</i>	endemic	<i>magical</i> (resembling the effects of magic)
astronomic	entomologic	meteorologic
<i>atypical</i>	epidermic	<i>methodical</i>
bacteriologic	epidemiologic	microscopic
biochemical	ethnographic	morphologic
biographic	imologic	mystic
biologic	etymologic	neurologic
botanic	galenic ( <i>galemeal</i> is the noun)	norologic
bronchoscopic	genealogic	obstetric
<i>chemical</i>	generic	ophthalmologic
chronologic	geographic	optic (pertaining to the eye)
classic (typical)	geometric	<i>optical</i> (pertaining to light or to the science of optics)
<i>classical</i> (pertaining to classical civilization and languages)	gonococic	otolaryngologic
<i>clinical</i>	gynecologic	paradoxical
criminologic	hemianopic	parasitic
cylindric	histologic	parantologic
cytologic	historic (celebrated in history)	parenthetic*
	<i>historical</i> (relating to history)	

\* Except in the sense of full of or addicted to the use of parentheses" in which 'parenthetical' should be used

<sup>1</sup> It will be noted that for a few words in the list two endings and two meanings are indicated. An interesting discussion of such distinctions is given by H. W. Fowler (A Dictionary of Modern English Usage, Oxford, Clarendon Press, 1930 p. 249, article on "-ic(al)")

pathogenic	psychiatric	<i>statistical</i>
pathognomonic	psychic	streptococcic
pathologic	psychologic	symmetric
pediatric	rhinologic	teleologic
periodic	rhythmic	theoretic
pharmaceutic (drugs)	roentgenologic	therapeutic
<i>pharmaceutical</i> (phar macv)	serologic	<i>topical</i>
pharmacologic	sociologic	topographic
philosophic	spheric (pertaining to the heavenly bodies)	toxologic
physiologic	<i>spherical</i> (sphere shaped)	typographic
problematic	staphylococcic	zoologic

## POSSESSIVE WITH PROPER NAMES

The use of the possessive case with the names of physicians associated with diseases, tests and other entities frequently creates a problem. The solution may be simplified if the question is considered as one of logical English usage rather than as one involving a set form for each phrase. In general, the use of the possessive form relates the thing designated to the worker for whom it is named more emphatically and personally than does the use of the name as an adjective modifier.

The following list gives examples of correct usage.

- Wassermann's test became popular
- The Wassermann test is widely used
- A Wassermann test was made
- Three Wassermann tests were made
- Wassermann tests are made daily
- Ewing's sarcoma was described in detail
- The Ewing sarcoma is one of the important types
- A Ewing tumor was found
- Six Ewing tumors were studied
- Parkinson's disease is well known
- The man had Gaucher's disease
- Flexner's dysentery is different from Sonne's
- Flexner dysentery was prevalent in that country
- The Betz cell is distinctive
- Betz cells were observed
- Examination showed numerous Hassall corpuscles
- Meckel's diverticulum is present in some persons
- Bence Jones protein was present

The patient had Argyll Robertson pupils  
 The Argyll Robertson pupil is unmistakable  
 He had Hutchinson teeth  
 Shive's solution is prepared as follows  
 Shive's solution (or Shive solution) was used  
 The Masson stain was employed  
 Masson's stain is easily prepared  
 He took some Masson stain

It will be noted that with an article, direct or indirect, the possessive form is not used, the name becoming a noun used as an adjective modifier. In instances in which an article is not used, the possessive form may or may not be employed, depending on the degree of personal relationship, or possessiveness and the emphasis that one wishes to express.

In instances in which two names joined with a hyphen are used as a modifier, the possessive form should never be used.

Niemann Pick disease  
 the Prausnitz-Kustner phenomenon  
 a Binet Simon test  
 Hand-Schüller Christian disease

**Possessive of Names Ending in a Sibilant.** The possessive of a word of more than one syllable which ends in "s" or in some other sibilant is regularly formed by the addition of an apostrophe. When a word ends in "ce," however, or when the final sibilant is silent, an apostrophe followed by "s" is added.

Hippocrates' writings	Horace's odes
Collins' method	Bourgeois's works

To form the possessive of a monosyllable, an apostrophe followed by "s" is added.

Bass's sign	Wise's comments
-------------	-----------------

## PLURALS

It is the policy of the American Medical Association Press to use an English plural whenever one is available. The following forms have been adopted.

*Accepted English Plurals*

abcesses	fibulas	plasmas
astabulumas	fistulas	plexuses
areolas	foramens	polyps (plural of polyp)
at'ages	formulas	primiparas
antrums	foveas	psammomas
aortas	ganglions*	pterygiums
apeves	glaucomas	radiuses
appendixes	glomuses	retinas
areolas	gummas	sanatoriums
auras	gymnasiums	sarcomas
axillas	hematomas	scapulas
cannulas	hernias	scleras
carcinomas	indexes	scotomas
chondromas	inoculumas	septums
cochleas	lacunas	sequestrums
collyriums	lamellas	serums
comedos	laminas	solariums
condylomas	lipomas	spectrums
conjunctivas	lumens	sputums
corneas	maculas	stigmas
craniums	maxillas	stomas
curriculumas	meatuses	stromas
deliriums	medrums (except for	syllabuses
dictums	"media" of eye)	symposiums
duodenumas	meniscuses	synechias
endotheliomas	microns	tubias
enemas	myceliums	traumas
epitheliomas	myomas	tympaniums
erythemas	myxomas	ulnas
exanthemas	nebulas	uveas
femurs	ostiums	vaginas
fetuses	patellas	
fibromas	perineums	

\* In the *Archives of Neurology and Psychiatry* the plural "ganglia" is used

*Foreign Plurals as Yet Retained*

alveoli	cortices	emboli
ampullae	criteria	fenestra
apparatus	data	fibrillae
bacteria	desiderata	foci
bronchi	diverticula	fossae
calices	dorsa	fundi

<i>hili</i>	<i>pelves</i>	<i>sarcinae</i>
<i>humeri</i>	<i>phenomena</i>	<i>sequelae</i> (plural of <i>se-</i> <i>quela</i> )
<i>larvae</i>	<i>plasmodia</i>	<i>spermatozoa</i>
<i>maxima</i>	<i>pleurae</i>	<i>striae</i>
<i>media</i> (of eye)	<i>polypi</i> (plural of <i>poly-</i> <i>pus</i> )	<i>uteri</i>
<i>minima</i>	<i>protozoa</i>	<i>verrucae</i>
<i>navi</i>	<i>puncta</i>	<i>vertebrae</i>
<i>nidi</i>	<i>quanta</i>	<i>viscera</i>
<i>nuclei</i>	<i>rami</i>	
<i>ova</i>	<i>rugae</i>	
<i>papillae</i>		

Names of tumors ending in ‘-oma,’ as well as all other words with that ending, have the English plural, ‘-omas’ (except, of course, when they are followed by Latin adjectives and are consequently treated as Latin words, such problems are discussed in a later section of this chapter)

For the names of organisms used as common nouns English plurals should be employed whenever they can be formed easily (amebas, spirochetes, uncinarias, rickettsias, but streptococci and staphylococci). All names ending in ‘a’ are given English plurals.

When the scientific name of an organism is used in the plural, to indicate species or types of a genus, a Latin plural is used. One says, for instance: “*Spirochaeta pallida* is one of the most important Spirochaetae.”

#### LATIN TERMINOLOGY

As stated in an earlier section of this book, the use of English names for diseases and anatomic structures is desirable. If, however, an author wishes to use Latin terms, he should be careful to see that the form is correct. When Latin anatomic names are used, the BNA terms should be employed.

Latin terminations of adjectives are often used incorrectly. Errors are especially common in dermatology, though they are by no means confined to this specialty. The accompanying table shows the gender of certain types of nouns according to their terminations.

The greatest source of error is provided by words ending in ‘a.’ All of these are feminine except hydroa and those in which the ‘a’ is

preceded by "m." All words ending in "ma" are neuter, such as erythema (*bullosum*), chloasma (*uterinum*), xeroderma (*pigmentosum*). Verruca is often a stumbling block, though according to the rule it is obviously a feminine noun and thus requires a feminine adjective (*verruca plana*)

*Gender of Nouns According to Terminations*

Masculine	Feminine	Neuter
US second declension, lupus, nevus	IS psoriasis, dermatitis	US third declension, ulcus, corpus
	A tinea, verruca—except hydroa and words ending in MA	MA sarcoma, erythema, chloasma
FS herpes	AS callositas, fragilitas	AS erysipelas
EN lichen	IES scabies, canities	
	E acne	UM molluscum
		U cornu
		EN sudamen
Λ anthrax	X cicatrix pompholyx	
ER zoster		
IO pernio		
DO comedo	DO livido	ON epidermophyton, kerion
	GO impetigo, vitiligo	

Mistakes are constantly made in the words *Spirochaeta* (feminine) and *Treponema* (neuter). The correct uses of these words with the adjectives pallidus, -a, -um and pertenuis, -is, -e are *Spirochaeta pallida* and *Spirochaeta pertenuis*, and *Treponema pallidum* and *Treponema pertenuis*.

Words of the second declension ending in "us," such as lupus (*erythematosus*), are masculine, whereas words of the third declension ending in "us" are neuter, such as ulcus (*molle*) and corpus (*luteum*).

Nouns ending in "is," with a few unimportant exceptions, are feminine. Examples are dermatitis (*factitia*), neuritis (*nodosa*) and arthritis (*fungosa*).

Callositas is a feminine noun, but erysipelas is neuter. One is saved from mistakes in terminology because these words seldom are followed by qualifying adjectives.

A glaring error which occurs frequently in medical writing con-

cerns the comparative forms of the words *magnus* (large) and *parvus* (small) The comparative forms are, respectively, *major* and *minor*, and are declined in the nominative as follows

	<i>Masculine</i>	<i>Feminine</i>	<i>Neuter</i>
SINGULAR	<i>major</i>	<i>major</i>	<i>majus</i>
PLURAL	<i>maiores</i>	<i>maiores</i>	<i>majora</i>
SINGULAR	<i>minor</i>	<i>minor</i>	<i>minus</i>
PLURAL	<i>minores</i>	<i>minores</i>	<i>minora</i>

The correct term designating the large lip of the vulva is *labium majus* (*labium minus* for the smaller lip) The correct plural forms are *labia majora* and *labia minora*, in regard to these, mistakes are rarely made

Errors are made at times in speaking of a condition which is unilateral Either the adjective *unilateralis* or the two words *unius lateris* may be used, *unius* being the genitive singular of the adjective *unus* -i, -um and *lateris* the genitive singular of the noun *latus* (*nevus unius lateris*) The expression *unius lateralis* is incorrect

The plural of the Latin word *punctum* (a point) is *puncta*, though this is not infrequently misspelled *punctae*, as if the nominative were *puncta*

For further information on Latin terminology the reader is referred to an article by Dr Howard Fox <sup>6</sup>

**Diphthongs** When Latin or Greek words have been taken into the English language, diphthongs need not be retained, and in the publications of the American Medical Association such words are written without diphthongs—e g, "hemorrhage," "anemia," "polycythemia" Diphthongs are not used in Latin names of diseases They are used in names of microorganisms when these names are officially adopted by scientific societies

The diphthongs "ae" and "oe" should be written with separate letters in Latin and in German words and in English words derived from Latin or from Greek through Latin when these words retain the diphthong The ligatures "æ" and "œ" should be used in Old English, in French and in some other modern languages

<sup>6</sup> Fox Howard Common errors in dermatologic terminology Arch Dermat & Syph 7 499-504 (April) 1923

# 7

## Capitalization

Periodicals vary in their use of capitalization. The following principles are observed in the publications of the American Medical Association Press.

A proper noun designating an individual person or thing or a derivative of a proper noun which retains close association with the word from which it originates should be capitalized. An adjective formed from a proper noun which has acquired a special meaning, however, is not capitalized (jacksonian convulsions, roentgen rays).

Common names derived from scientific names of plants, animals or bacteria are not capitalized when they occur in the text (bacillus, spirochete, ameba). In a scientific name, however, the name of the genus is capitalized (*Spirochaeta pallida*).

A latinized name of a person used in the genitive case should be considered as still a proper noun and hence should be capitalized (fissura Rolandi, ductus Botalli), except in the scientific name of an organism (*Sporotrichum beurmanni*).

Of course, one begins each sentence with a capital, as well as a complete sentence that is quoted directly. Capitals are also used for the initial letters of words (other than conjunctions, articles and prepositions of less than five letters) and of the elements of compound words (except for the suffix "like") in headings of tables and in paragraphed side headings. One does not capitalize the words "table," "figure," "plate," "case" and "experiment" when they occur in the text.

It is not desirable to capitalize the names of chemical elements or compounds used as part of the text.

The following rules apply.

Capitalize

1 Revolutionary War, War of the Rebellion, Civil War, Spanish-American War, Federal Food, Drug and Cosmetic Act, Harrison Narcotic Law, Maternity and Infancy Act, Hippocratic Oath, Southern states, Mississippi River, Indiana Avenue, Cook County,



Christian science, Christian scientist, First Street East, First Street N W, Old World, New World, Continent, Continental, Orient, Occident, Soviet, Woulfe bottle, Berkefeld filter, Bunsen burner, Petri dish, the Harvey Lecture

2 Cited titles of articles and books (But see pages 119-131 for style in footnotes and bibliographies)

3 Both parts of a compound word (except for the suffix "like") in headings, proper names and titles His residence is on Thirty-Fifth Street, Dr Smith read a paper on "After-Effects of Measles" and one on "Tumor-like Changes in the Skin"

Write in lower case

1 Vienna school, city of New York, state of New York, state, government, federal, gram-positive, gram-negative, mendelian, jacksonian, freudian, cesarean, eustachian, meibomian, haversian, sylvian and other adjectives formed from proper nouns, plaster of paris, sudan IV, prussian blue, india ink, achilles tendon, pyrex, a m, p m, no, case 1, figure 3 First and Main streets, Southern states

*Write in capitals*

Court (in Medicolegal Court)  
North, South, East, West (when they  
refer to geographic divisions)  
Far East, Middle West

Senate, House (United States)  
Congress (United States)  
Fellow (of A M A)  
President, Secretary (of A M A)

President Elect (of A M A)  
President of the United States

Association (meaning A M A)

Annual Session (of A M A)

Section (of A M A)

Editor (of A M A or of the  
publication in which an article  
appears)

*Write in lower case*

court (elsewhere)  
north, south, east, west (when they  
refer to direction)

spring, summer, autumn, winter  
senate, house (of a state)  
congress (international gathering)  
fellow (of some other body)  
chairman, secretary (of a section  
of A M A)

governor, mayor, king, pope, em-  
peror, shah or any other for-  
eign potentate

association (meaning any other  
association)

annual session (of some other  
organization)

section (of some other organization  
or institution)

editor (of some other organization  
or publication)

*Write in capitals*

Council (of A M A)  
 Sixty Ninth Regiment  
 World War I II  
 Von Jaksch (at the beginning of a sentence)  
 Chicago Medical Society

first word after a colon if it introduces a complete sentence  
 Gram Roentgen as proper names

*Write in lower case*

council (of some other organization)  
 Seventh and Sixty Ninth regiments  
 great war  
 von Jaksch (within a sentence)

Upshur and Sangamon County medical societies  
 first word after a colon if in a mere clause or list  
 gram positive roentgen ray

## 8

## Abbreviations

In scientific writing, abbreviations should be used only when necessary for condensation or to facilitate reading. In the publications of the American Medical Association Press only a few standard abbreviations are used in the text. If special abbreviations are employed in tabular or other condensed material, they should be explained in a footnote.

## ADDRESSES

In the following list are given the standard abbreviations for the names of the states of the Union.

Ala	Ia	Mich	N Y	Tenn
Ariz	Ida	Minn	Neb	Tex
Ark	Ill	Miss	Nev	Va
Calif	Ind	Mo	O	Vt
Colo	Kan	Mont	Okla	W Va
Conn	Ky	N C	Ore	Wash
D C	La	N D	Pa	Wis
Del	Mass	N H	R I	Wyo
Fla	Md	N J	S C	
Ga	Me	N Mex	S D	

(No abbreviation is provided for Utah, which should never be abbreviated.) As a rule, the names of states containing only four or five letters should be spelled out (Idaho, Iowa, Maine, Ohio and Texas). The names of the other states are abbreviated when they follow the name of a city or county but not when they are used alone (in Akron, Ohio, in Kentucky, in Cook County, Ill., in Paterson, N. J.).

The names of territories and possessions of the United States should not be abbreviated.

It is not necessary to mention the state after the names of the following large cities unless it is desirable for some particular reason.

Baltimore	Denver	New Orleans	St Paul
Boston	Detroit	New York	Salt Lake City
Brooklyn	Indianapolis	Oklahoma City	San Francisco
Buffalo	Iowa City	Omaha	Seattle
Chicago	Los Angeles	Philadelphia	
Cincinnati	Milwaukee	Pittsburgh	
Cleveland	Minneapolis	St Louis	

When a Canadian city is mentioned, both the name of the province (written in full) and "Canada" should follow the name (Exception For Montreal, Toronto and Quebec the name of the province may be omitted )

The name of a foreign country should never be abbreviated The name of the country should be mentioned after the name of a foreign city unless it is clear from the text what country is concerned

Before a name "Saint" is abbreviated (St Louis, St Paul) "Fort," "Mount" and "Santa" or "San," however, are not abbreviated (Fort Duquesne, Mount Vernon, Santa Barbara, San Francisco)

**Street Addresses** In ordinary text matter, at the end of an article, and in general wherever space permits, street addresses should be written out in full When abbreviation is necessary, the following forms are used

441 Vine St	302-1st Ave
80 N Grand Blvd	227-16th St
50 W 50th Ave	501 1st St N W
5 Bay State Rd	16th and P Sts
601 Fullerton Parkway	1500 Medical Arts Bldg

When a mailing address which includes a postal zone number is cited, no comma is used after the name of the city, but the zone number and name of the state are separated by a comma Chicago 10, Ill

#### FOREIGN ADDRESSES

66 Boulevard Saint Michel, Paris 6\*, France  
 2 Rue Casimir Delavigne Paris 6\* France  
 Sternwartenstrasse 8, Leipzig C 1 Germany  
 Rambler de Catalunya 72, Barcelona Spain  
 Calle de Villarroel 17, Barcelona Spain  
 Via Farini 6, Bologna, Italy  
 ■ Wimpole St, London W 1 England  
 Mexico, D F, Mexico

## NAMES OF PERSONS

No abbreviations except the initials should be used for the names of persons (Thomas E. Clark or T. E. Clark, not Thos. E. Clark, Charles E. McFarlane or C. E. McFarlane, not Chas. E. McFarlane.)

**Titles and Degrees** Before a proper name one should never spell out "Mr.," "Mrs." or "Dr." "Major" should never be abbreviated. Other titles are abbreviated when they are used before the first name or initials but written in full when used before the family name alone.

Prof. A. T. Reed	Pres. M. A. Brown	Colonel Dupont
Capt. Charles Ryerson	Professor Walton	President Truman
Supt. J. A. Milton	Lieutenant Myerson	

Degrees and titles following names are abbreviated. In capital lines in headings, degrees are set in large and small capitals (Ph. D., Ph. G.).

In the periodicals published by the American Medical Association it is the policy not to include after the name of an author who is a Doctor of Medicine any degree of rank lower than that degree, for instance, one would write "Robert Clark, M. D., Ph. D.," but not "Robert Clark, M. A., M. D."

*Abbreviations of Degrees*

Bachelor of Arts	B. A.
Bachelor of Divinity	B. D.
Bachelor of Law	B. L.
Bachelor of Laws	LL. B.
Bachelor of Medicine	M. B.
Bachelor of Philosophy	Ph. B.
Bachelor of Science	B. S.
Doctor of Dental Surgery	D. D. S.
Doctor of Divinity	D. D.
Doctor of Laws	J. D. or LL. D.
Doctor of Letters	Litt. D.
Doctor of Medicine	M. D.
Doctor of Philosophy	Ph. D.
Doctor of Science	D. Sc.
Fellow of the American College of Surgeons	F. A. C. S.
	F. C. A. P.
	R. C. P.
land)	F. R. C. S.
Graduate in Pharmacy	Ph. G.

Master of Arts	M.A
Master of Dental Surgery	M.D.S
Master of Science	M.S
Master of Surgery	M.S

# DATES

In the following list are given the standard abbreviations for the names of the months

Jan	Apr	Oct
Feb	Aug	Nov
Mar	Sept	Dec

"March" and "April" should be spelled out except when it is necessary to abbreviate them in tabular matter. No abbreviation is used for "May," "June" or "July." The names of the other months should be abbreviated when both the day and the year are given (Feb 29, 1948). When only the month and the day are given, or only the month and the year, the name of the month should be spelled out (September 3, October 1947).

Frequently in descriptions of cases or of experiments, several dates in the same year are mentioned consecutively. In such instances it usually is advisable to mention the year but once giving only the month and the day for subsequent dates as in the following passage

A man aged 60 was admitted to the hospital on March 5, 1947. He was operated on on March 25 and was dismissed on May 10. In June 1948 he was readmitted.

"In 1947-1948" may be used to designate the year that includes part of both. "From 1946 to 1948" should be used instead of "1946-1948" in text matter.

# WEIGHTS MEASURES AND TIME

Units of the metric system (except meter, "liter" and "kilometer," which are spelled out except in tables, and "microgram," which preferably should not be abbreviated) are abbreviated after numerals but not otherwise. A few other abbreviations are similarly treated: a.m., p.m., C, F, r, D. For example

10 a.m.	in the morning in the forenoon
7 p.m.	in the afternoon
50 r.	measured in roentgens

3 cm	marked off in centimeters
4 kg	per kilogram
10 mg	in each milligram
120 mm	a few millimeters
98° F	the Fahrenheit scale
1 D	the unit was the diopter
40° C	the centigrade thermometer

The following abbreviations for the units of the metric system are those recommended in the "Pharmacopoeia of the United States" These abbreviations are the same in both the singular and the plural

M = meter	Gm = gram
dm = decimeter	dg = decigram
cm = centimeter	cg = centigram
mm = millimeter	mg = milligram
kg = kilogram	
L = liter	
dl = deciliter	
cc = cubic centimeter	
cu mm = cubic millimeter	

#### ABBREVIATIONS IN TABULAR MATTER OR FORMULAS

The following standard abbreviations are used only in tabular matter or formulas (these abbreviations are the same in the singular and in the plural)

Å	angstrom unit	μμ	millimicrons
a c	alternating current	ma	milliampere
ax	axis	ma min	milliampere minute
cyl	cylinder	mC	millicurie
d c	direct current	mC hr	millicurie hour
d v	double vibration	mEq	milliequivalent
db	decibel	mg hr	milligram hour
dr	drachm	min	minute
ft	foot	mM	millimol
gal	gallon	mo	month
Gm cal	gram calorie	oz	ounce
gr	grain	p d	prism diopter, papilla diameter
hr	hour	pt	pint
in	inch	qt	quart
kv	kilovolt	sec	second
kv a	kilovolt ampere	2d	second
lb	pound	3d	third
μ	microns	yd	yard

## ABBREVIATIONS PERMISSIBLE IN OPHTHALMOLOGY

*Abbreviations of measurements of squint, especially in series of values*

HP	hyperphoria
HT	hypertropia (with L or R)
XT and ST	exotropia and esotropia (with L or R)
Similar abbreviations	

*General*

A	prism diopters
f c	foot candles
p d or P D	papilla diameter
R E and L E	right eye and left eye
D	diopters (with values)
sph (for spherical) and cyl (for cylindrical) in such expressions as ' + 1.25 D sph ' ' - 2.00 D cyl '	

*Omission of D and perhaps the sph and cyl in refractions*

Thus + 1.25 sph - 2.00 cyl, axis 90

Or

+ 1.25 - 2.00, axis 90

*Near* used alone in expressions like "accommodation for *near* was normal "

*Perimetry* "field for  $\frac{3}{800}$  white " or "field for white,  $\frac{3}{800}$  "

## MISCELLANEOUS ABBREVIATIONS

"Day" and "days" should never be abbreviated, even in tables

Names of chemical elements should be abbreviated only in tabular matter and formulas. Chemical symbols are not followed by a period (Ca, Hg)

One writes "an angle of 45 degrees ". Symbols may be used if the expressions are complex and recur frequently, as in "angles of 15° 30' 15" and 45° 6' ". The symbol for "degrees" may be omitted in expressions of temperature, thus, one may write "100 F" and "39 C" rather than "100° F" and "39° C ".<sup>1</sup> The word "degree" should be

<sup>1</sup> It is necessary however to speak of "a rise of 1 degree (F)". Body temperature should be expressed preferably according to the Fahrenheit scale. If it is given in centigrade degrees the Fahrenheit equivalent should follow in parentheses.



spelled out in expressions of latitude and longitude if minutes and seconds are not mentioned, as in the phrase "a difference of 3 degrees of latitude." In some expressions the word "degree" may be omitted, as in "latitude 42 north." Write "8° 45' 15"."

In tables both clock time and extent of time may be written in figures. The time 25 minutes and 16 seconds past 3 o'clock may be written "3 25 16", a period of 14 hours, 45 minutes and 30 seconds may be written "14° 45' 30"."

British money, when set in figures, is expressed as follows £23 7s 3d

American money is expressed as follows \$15, \$20 42, 56 cents

In tables, signs and abbreviations should be used in place of words as much as practicable. Use + and - for positive and negative, >, < and = for greater than, less than and equals, ♂ or □ for male and ♀ or ○ for female. The sign % may be used in tables, but not elsewhere.

In text matter, a reaction or degree of change should be expressed with words rather than with symbols (4 plus, positive, negative, plus-minus). In tables, symbols may be used as is most convenient in the individual instance.

The basal metabolic rate is expressed in text matter as "-5 per cent" or "+18 per cent."

Dimensions are given as "4 by 5 by 7 inches," not "4 X 5 X 7 inches."

In ordinary matter, expressions of dosage should be spelled out. Write "4 grains (0.25 Gm.) three times a day," not "gr iv, t i d."

Except where condensation is an object, as in tables, one should write "eighth-molar" or "tenth-normal," not "M/8," "decinormal" or "N/10." If it is desirable for some special reason to use the fraction, the slant instead of the horizontal line should be used to separate the numerator and the denominator. At times, when large or complicated fractions are involved, it may be clearer to write "0.25 normal" or "0.03 normal." Multiples of normal should be expressed as "three times normal" rather than as "3/N."

The abbreviation for the expression "1 to 1,000" is "1:1,000." Either form may be used, according to the author's preference.

## SCIENTIFIC NAMES OF ORGANISMS

**Bacteria.** After the name of a species has been given in full, as "*Spirochaeta pallida*," the generic name should be abbreviated, as "*S pallida*," throughout the paper

This rule applies only to the *same species*. For instance, after *Streptococcus fecalis* has been mentioned once, "*Str fecalis*" is used, but if another species, such as *Streptococcus impetiginus*, is then mentioned, the name must be written out the first time it appears

In tables, abbreviations may be used if the full name is given in the text, either preceding or following the table. If some organisms are mentioned in the table which are not referred to in the text and the application of this rule would give the table an awkward appearance, it usually is better to write out all the names in the table. If there are only two or three organisms which are not mentioned in the text and they are species of a common genus, such as *Staphylococcus*, the abbreviation for which is unmistakable, or of a genus other species of which are mentioned so frequently in the text that there is no danger of confusion, the names of these species may be abbreviated in the table

A name should be written in full in the heading for an abstract or a report in a society transaction and also the first time it appears in the text. In society transactions, after a name has been given in full once in a report, it should be abbreviated throughout that report and the discussion thereon, if the same organism is mentioned in another report the name should again be written in full

**Fungi and Parasites** Names of organisms which are well known to physicians, such as *Epidermophyton* and *Taenia* are subject to the rules that govern the abbreviation of names of bacteria. There are many names, however, both of genera and of species, which do not yet appear in medical dictionaries. In the publications of this press abbreviations are not used, as a rule, unless the name appears in "Blakiston's New Gould" or Dorland's "American Illustrated" medical dictionaries together with a definition. If some of the names mentioned in an article have usable abbreviations and others do not, it is well to spell out all the names in the article

**Other Generic Names** Names of plants, animals and insects should not be abbreviated

## MISCELLANEOUS RULES

The expression "figure 1" should be spelled out in ordinary text matter. One writes "fig 1" in parentheses with a lower case *f* but "Fig 1" at the beginning of a legend with a capital *F*. When "Figure 1" comprises the whole legend, it should be spelled out and capitalized. Examples follow.

The heart (fig 1) shows decided enlargement.

The heart shows decided enlargement (see figure 1).

FIG 1 Enlargement of the heart.

Write "fourth cervical" and "second lumbar," rather than "C IV" or "L 2," except in tabular matter.

"BCG" and "QRS" are written without spacing. "P-R," "S-7" and "RS-T" intervals are hyphenated.

"BAL" (British antilewisite) is used without periods or spacing.

"U S P," "N N R," "N F" and "BNA" are written without regular spacing. These abbreviations may follow the name of a drug without the interposition of a comma.

Tuning forks are designated as follows: C-2, C-1, C, c-1, c-2, etc., capital letters being used for sounds below middle C and lower case letters for those above it.

Both in the text and in tabular matter, "no 3" should be used rather than "number 3." Whenever possible, "no " should be omitted (communication 3, Jaeger's test type 1).

When "page 6" appears in the text, the word "page" should not be abbreviated.

Abbreviations of names of periodicals are given at the end of this book, and other abbreviations used chiefly in footnotes and bibliographies are given in the chapter entitled "Bibliographic Material" (page 119).

Abbreviations used only in prescriptions (or occasionally in tables) are given in the chapter entitled "Pharmaceutic Products and Prescriptions" (page 115).

Rules for the use of numbers, giving information on when they should be spelled out and when set in figures, are included in the chapter entitled "Numbers" (page 107).

# 9

## Numbers

Numbers appear frequently in scientific—especially in statistical—articles, it is sometimes difficult to determine when they shall be spelled out and when put in figures. The American Medical Association Press has therefore adopted various general and specific rules governing such usage in its publications.

Numbers of patients or cases or, when considered analogously, animals or specimens should be put in figures. If “one” is used in an indefinite rather than in a numerical sense (for instance, if “a patient” might be substituted), it may be spelled out.

Numbers designating measurements should, in general, be put in figures.

Miscellaneous numbers, concerning which instructions are not included in the specific rules to be given, should be spelled out for the numbers one to nine, for 10 and above figures should be used.

A hospital of 49 rooms was built

We examined three fingers

He had consulted four physicians

If, however, in an individual article there are several large numbers of items of any one category—for instance, injections or hospitals—it is advisable to use figures for all the numbers in that group.

### SPECIFIC RULES

Set in figures both whole numbers and fractions denoting

1. Numbers of cases or patients or, when considered analogously, animals or specimens in text and in roman and italic sideheads when corresponding figures appear in the text.

2. Values for measurements, such as temperature, pulse rate, respiratory rate, blood count, specific gravity, age, weight, height, length, breadth, area, capacity, degrees, percentages and ratios. (The amount of a dose, as a measurement, is put in figures, but the number of doses is considered with the miscellaneous numbers in the paper and spelled out.)

3. Dates Jan 18, 1948, January 18

4. Clock time 7 a m, 6 30 p m, 15 minutes and 20 seconds past 4 p m

5 Sums of money \$250 || 50 75 cents £15 8s 3d

6 In tabular matter and in the headings of tables, every number that can be so expressed

7 Numbers indicating serial position page 22, case 3, table 5 chapter 10 figure 1 group 1 type IV grade 2 cat 3 A dog 1096 (note omission of comma)

8 Experimental and laboratory results which involve duration of time

9 Numbers above nine representing length of time for 30 minutes after 10 hours 15 minutes past 1 p.m. 18 years ago a 24 hour culture

10 Any one digit number used in conjunction with a two digit number 8 to 12 cell layers

### Spell out

1 Ordinal numbers the eighth patient on the tenth day in the eighteenth century

2 Numbers used as nouns or in an indefinite sense in the nineties per hundred per thousand by fifties per hundred grains (but per 25 pounds)

3 Numbers of doses or injections families litters cultures determinations, chapters

4 All numbers except those of four digits in titles or subtitles of articles in titles of abstracts and in titles cited in footnotes

### Numbers are spelled out as follows

one-half the patients (hyphenate where of is omitted)

half the patients

a third of the patients

three fourths of the patients

one half hour

half an hour

a half hour

two and a half hours

three and one half hours

increased by two thirds

twenty four

one hundred and twenty six

twenty-eight hundred

two thousand three hundred and sixty

one million, three thousand five hundred and one

A fraction should be hyphenated when it is used as an adjective, as in the phrase "one-half hour," or when ambiguity might result without the hyphen when it is used as a noun, the hyphen may be omitted

## MISCELLANEOUS EXAMPLES

3 drops capsules tablets  
 2 tablespoons 2 teaspoons  
 3 disk diameters  
 4 fingerbreadths  
 1 erythema dose  
 $\frac{1}{2}$  erythema dose  
 1 skin unit  
 50 roentgens  
 2 unit skin doses  
 three doses of neoparsphenamine  
 12 injections of a bismuth preparation  
 temperature of  $96^{\circ}$  F  
 a rise of 1 degree (F)  
 4 plus (not four plus or + + + + except in tables)  
 The epithelium contained from 2 to 10 cell layers  
 His diet included one apple twice a day and two glasses of water each morning  
 and each afternoon  
 a 6 month fetus a 9 week fetus a 10 day embryo  
 a 10 mm embryo  
 a 6 day old child a 10 hour old boy an 8 week old girl a 10 month old  
 child a 30 year old man  
 a six week period  
 after six weeks treatment  
 after six weeks of treatment  
 1947-1948 (the year including parts of both)  
 1946 to 1948  
 1947 and 1948  
 6 year molars  
 6 pounds 11 ounces  
 3 feet 6 inches  
 She was six months pregnant  
 The child was born one month prematurely  
 a 24 hour culture  
 size 7 4A shoes  
 2d  
 3d  
 pneumococci of type III the type V pneumococcus Pneumococcus type I  
 per hundred cubic centimeters per thousand grams<sup>1</sup> per 10 Gm  
 in each hundred cubic centimeters [or] in each 100 cc

---

Per hundred cubic centimeters is written rather than per 100 cc because the  
 latter phrase would be read per one hundred cubic centimeters and is not likely to be  
 encountered. Per 10 Gm is clear since the phrase can be read in only one way. Either  
 in each 100 Gm or in each hundred grams is idiomatically correct consequently  
 either may be used according to an author's preference.

in each 10 Gm  
 layers I to VI of the cortex  
 leads I, II and III<sup>2</sup> of the electrocardiogram  
 the T wave in lead I, T<sub>2</sub>, the QRS complex in lead III<sup>2</sup>  
 6 Gm is used  
 5 drops was given  
 radioactive phosphorus—P<sup>32</sup>  
 the valence of a radical—PO<sub>4</sub>

## EQUIVALENT VALUES

**Metric Equivalents** In scientific matter in the publications of the American Medical Association the metric units are given first, followed, in parentheses, by values according to other systems. In some instances an exact equivalent is needed—for instance, when a small dose of a drug or the thickness of a lens is concerned. In others, an approximate equivalent is preferable. The diameter of a cutaneous lesion measuring 2 inches should be expressed as "5 cm" rather than as "5.08 cm." One should consider the accuracy with which measurement of the thing under consideration could be made.

Centigrade measurements may be converted to Fahrenheit multiply by 9, divide by 5 and add 32. Fahrenheit may be converted to centigrade subtract 32, multiply by 5 and divide by 9.

In computing approximate equivalents, one should compute the exact equivalent to from one to three decimal places and then take the nearest approximate value, rather than multiply by an approximate value (such as 2.5 cm. for 1 inch rather than 2.54 cm.). Approximate equivalents for metric and apothecaries' systems may be found in most books issued under the auspices of the Council on Pharmacy and Chemistry. Included are "New and Nonofficial Remedies," "Useful Drugs," "National Formulary" and "Epitome of the United States Pharmacopoeia and National Formulary."

In the following tables are given equivalent values that are frequently needed.

<sup>2</sup> Most journals devoted to cardiology use "leads I, II and III." This form has been used in the special journals published by the Association. The *Journal* uses "leads 1, 2 and 3" because arabic numerals are preferred whenever possible.

<sup>3</sup> The T wave in lead III is perhaps preferable to "T<sub>2</sub>." When many values are given however, the shorter expression is convenient. It is advisable to be as consistent as possible within an article and not to jump unnecessarily from one form to the other.

## AVOIRDUPOIS WEIGHTS

OZ.	GM	KG	LB	GM	KG	LB	GM	KG
1	28.35		61	27.669	11	27.7	131	59.420
2	56.70		62	28.122	20	28.1	132	59.874
3	85.05		63	28.576	30	28.6	133	60.327
4	113.40		64	29.029	40	29.0	134	60.781
5	141.75		65	29.483	50	29.5	135	61.234
6	170.10		66	29.937	60	29.9	136	61.688
LB	GM	KG	67	30.390	66	30.4	137	62.142
31	113.40	0.11	68	30.844	26	30.8	138	62.595
32	226.80	0.23	69	31.297	85	31.3	139	63.049
46	340.19	0.34	70	31.751	44	31.8	140	63.502
1	433.59	0.5	71	32.205	03	32.2	141	63.956
2	907.18	0.9	72	32.658	82	32.7	142	64.410
3	1,360.77	1.5	73	33.112	21	33.1	143	64.863
4	1,814.37	1.8	74	33.565	81	33.6	144	65.317
5	2,267.96	2.3	75	34.019	40	34.0	145	65.770
6	2,721.55	2.7	76	34.472	99	34.5	146	66.224
7	3,175.14	3.2	77	34.926	58	34.9	147	66.678
8	3,628.73	3.6	78	35.380	18	35.4	148	67.131
9	4,082.33	4.1	79	35.833	77	35.8	149	67.585
10	4,535.92	4.5	80	36.287	36	36.3	150	68.039
11	4,989.51	5.0	81	36.740	95	36.7	151	68.492
12	5,443.10	5.4	82	37.194	54	37.2	152	68.945
13	5,896.69	5.9	83	37.648	14	37.6	153	69.399
14	6,350.29	6.4	84	38.101	73	38.1	154	69.853
15	6,803.88	6.8	85	38.555	32	38.6	155	70.306
16	7,257.47	7.3	86	39.008	91	39.0	156	70.760
17	7,711.06	7.7	87	39.462	50	39.5	157	71.213
18	8,164.65	8.2	88	39.916	10	39.9	158	71.667
19	8,618.25	8.6	89	40.369	69	40.4	159	72.121
20	9,071.84	9.1	90	40.823	28	40.8	160	72.574
21	9,525.43	9.5	91	41.276	87	41.3	161	73.028
22	9,979.02	10.0	92	41.730	46	41.7	162	73.481
23	10,432.61	10.4	93	42.184	05	42.2	163	73.935
24	10,886.21	10.9	94	42.637	65	42.6	164	74.389
25	11,339.80	11.3	95	43.091	24	43.1	165	74.842
26	11,793.39	11.8	96	43.544	83	43.5	166	75.296
27	12,246.98	12.2	97	43.998	42	44.0	167	75.750
28	12,700.57	12.7	98	44.452	01	44.5	168	76.203
29	13,154.17	13.2	99	44.905	60	44.9	169	76.657
30	13,607.76	13.6	100	45.359	20	45.4	170	77.110
31	14,061.35	14.1	101	45.812	79	45.8	171	77.564
32	14,514.94	14.5	102	46.266	38	46.3	172	78.017
33	14,968.53	15.0	103	46.719	97	46.7	173	78.471
34	15,422.13	15.4	104	47.173	57	47.2	174	78.925
35	15,875.72	15.9	105	47.627	16	47.6	175	79.378
36	16,329.31	16.3	106	48.080	75	48.1	176	79.832
37	16,782.90	16.8	107	48.534	34	48.5	177	80.285
38	17,236.49	17.2	108	48.987	93	49.0	178	80.739
39	17,690.09	17.7	109	49.441	52	49.4	179	81.192
40	18,143.68	18.1	110	49.895	12	49.9	180	81.646
41	18,597.27	18.6	111	50.348	71	50.3	181	82.099
42	19,050.86	19.1	112	50.802	30	50.8	182	82.553
43	19,504.45	19.5	113	51.255	89	51.3	183	83.007
44	19,958.05	20.0	114	51.709	49	51.7	184	83.460
45	20,411.64	20.4	115	52.163	08	52.1	185	83.914
46	20,865.23	20.9	116	52.616	67	52.6	186	84.368
47	21,318.82	21.3	117	53.070	26	53.1	187	84.821
48	21,772.41	21.8	118	53.524	85	53.5	188	85.275
49	22,226.01	22.2	119	53.977	45	54.0	189	85.728
50	22,679.60	22.7	120	54.431	04	54.4	190	86.182
51	23,133.19	23.1	121	54.884	63	54.9	191	86.636
52	23,586.78	23.6	122	55.338	22	55.3	192	87.089
53	24,040.37	24.0	123	55.791	81	55.8	193	87.543
54	24,493.97	24.5	124	56.245	40	56.2	194	87.996
55	24,947.56	24.9	125	56.699	00	56.7	195	88.450
56	25,401.15	25.4	126	57.152	59	57.2	196	88.904
57	25,854.74	25.9	127	57.606	18	57.6	197	89.357
58	26,308.33	26.3	128	58.059	77	58.1	198	89.811
59	26,761.93	26.8	129	58.513	37	58.5	199	90.264
60	27,215.52	27.2	130	58.966	96	59.0	200	90.718



in each 10 Gm  
 layers I to VI of the cortex  
 leads I II and III<sup>2</sup> of the electrocardiogram  
 the T wave in lead I T<sub>2</sub> the QRS complex in lead III<sup>2</sup>  
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<sup>2</sup> The T wave in lead III is perhaps preferable to "T<sub>2</sub>." When many values are given however, the shorter expression is convenient. It is advisable to be as consistent as possible within an article and not to jump unnecessarily from one form to the other.

## MEASURES OF LENGTH

FT	IN	CM	FT	IN	CM	FT	IN	CM
	<sup>1</sup> / <sub>4</sub>	0 64	2	7	78 74	5	4	162 56
	<sup>3</sup> / <sub>8</sub>	1 27	2	8	81 28	5	5	165 10
	<sup>1</sup> / <sub>2</sub>	1 91	2	9	83 82	5	6	167 64
	<sup>3</sup> / <sub>4</sub>	2 54	2	10	86 36	5	7	170 18
	1	3 08	2	11	88 90	5	8	172 72
	2	5 08	3	0	91 44	5	9	175 26
	3	7 62	3	1	93 98	5	10	177 80
	4	10 16	3	2	96 52	5	11	180 34
	5	12 70	3	3	99 06	6	0	182 88
	6	15 24	3	4	101 60	6	1	185 42
	7	17 78	3	5	104 14	6	2	187 96
	8	20 32	3	6	106 68	6	3	190 50
	9	22 86	3	7	109 22	6	4	193 04
	10	25 40	3	8	111 76	6	5	195 58
	11	27 94	3	9	114 30	6	6	198 12
	12	30 48	3	10	116 84	6	7	200 66
1	1	33 02	3	11	119 38	6	8	203 20
1	2	35 56	4	0	121 92	6	9	205 74
1	3	38 10	4	1	124 46	6	10	208 28
1	4	40 64	4	2	127 00	6	11	210 82
1	5	43 18	4	3	129 54	7	0	213 36
1	6	45 72	4	4	132 08	7	1	215 90
1	7	48 26	4	5	134 62	7	2	218 44
1	8	50 80	4	6	137 16	7	3	220 98
1	9	53 34	4	7	139 70	7	4	223 52
1	10	55 88	4	8	142 24	7	5	226 06
1	11	58 42	4	9	144 78	7	6	228 60
2	0	60 96	4	10	147 30	7	7	231 14
2	1	63 50	4	11	149 84	7	8	233 68
2	2	66 04	5	0	152 40	7	9	236 22
2	3	68 58	5	1	154 94	7	10	238 76
2	4	71 12	5	2	157 48	7	11	241 30
2	5	73 66	5	3	160 02	8	0	243 84
2	6	76 20						

## MEASURES OF LENGTH—(Cont. on p. 1)

1 ft. = 0 3048 meter (m)
10 ft. = 3 048 meters
1 000 ft. = 304 8 meters [or] 0 3 kilometer (km)
1 mile = 1 6093 km

## MEASURES OF AREA

1 sq. in. = 6 4516 sq. cm
1 sq. ft. = 0 0929 sq. m.
1 sq. yd. = 0 8361 sq. m.

## MEASURES OF VOLUME

1 cu. in. = 16 387 cu. cm
1 cu. ft. = 0 0783 cu. m.
1 cu. yd. = 0 7646 cu. m.

## MEASURES OF CAPACITY

Fluidrachms	Ml	Liters	Fluidounces	Ml	Liters
1	3 7	0 004	1	29 57	0 03
2	7 39	0 007	2	59 15	0 06
3	11 09	0 011	3	88 72	0 09
4	14 79	0 015	4	118 29	0 12
5	18 48	0 018	5	147 87	0 15
6	22 18	0 022	6	177 44	0 18
7	25 88	0 026	7	207 02	0 21
8	29 57	0 030	8	236 59	0 24
			9	266 16	0 27
			10	295 73	0 30
			11	325 31	0 33
			12	354 88	0 35
			13	384 46	0 38
			14	414 03	0 41
			15	443 61	0 44
			16	473 18	0 47
			17	502 75	0 50
			18	532 33	0 53
			19	561 90	0 56
			20	591 47	0 59

## ENUMERATIONS

In enumerations, periods follow arabic numerals which designate complete sentences, items in lists separated by periods and tabulated items. Parentheses are used around arabic numerals which designate clauses or listed items separated by commas or semicolons. An example of enumeration of complete sentences is given in the chapter entitled "The Subject and the Material," in the section on conclusions (see page 29). Examples of other types of enumeration follow.

The cases were grouped according to the result of treatment as follows:

- 1 Cases in which the result of treatment was favorable: tension normal, visual acuity 1/2 or more
- 2 Cases in which the result of treatment was less favorable: tension normal, visual acuity from 1/60 to 1/3
- 3 Cases in which the result of treatment was unfavorable: tension raised or visual acuity less than 1/60 or eye removed

There are three essential factors in the development of experimental cholesterol arteriosclerosis: (1) cholesterol in the diet, (2) hypercholesteremia and (3) injury to the intima of the arteries.

# 10

## Pharmaceutic Products and Prescriptions

In medical writing—particularly that dealing with the treatment of disease—medicaments are mentioned frequently. In the publications of the American Medical Association Press, established products are designated by the official English names listed in the "Pharmacopoeia of the United States." A convenient volume, "Epitome of the Pharmacopoeia of the United States and the National Formulary," is issued by the Council on Pharmacy and Chemistry of the Association. Each year the Council on Pharmacy and Chemistry publishes a book, "New and Nonofficial Remedies" in which are listed and described the newer preparations which it has approved. When such a product is mentioned in one of the publications of the Association, the name given in this book in boldface 8 point capitals is used. When a proprietary preparation that has not been accepted by the Council is mentioned in a paper, the most accurate descriptive name available should be employed, and the exact chemical composition should be included. In the spelling of chemical terms it is well to follow the rules adopted by the American Chemical Society.

It is the policy of the Association to reject articles about drugs when there is insufficient evidence of their efficacy and harmlessness. A paper describing a thorough scientific evaluation of the effects of a new product, however, at times is acceptable.

### TRADE MARKED DRUGS

In the periodicals published by the American Medical Association, the names of trade marked drugs are not capitalized. They are quoted *in toto* the first time they are used, e.g., "paredrine hydrobromide ophthalmic," "paredrine hydrobromide aqueous", after that, shortened terms, such as ophthalmic "paredrine" and aqueous "paredrine," in quotation marks are used.

The quotation marks are used, not to distinguish between official

and unofficial products, but to show the identity and specialness of trade-marked products

In those instances in which a trade-marked preparation has been accepted by the Council on Pharmacy and Chemistry, (N N R) in parentheses is placed after the name in the text the first time it appears

The same policy is followed with respect to the names of drugs and physical therapy apparatus

### PRESCRIPTIONS

That prescriptions may appear properly in a published article, it is well to have them uniform in style and either wholly in Latin or wholly in English. The use of English is preferable. Many newer products do not have latinized endings. An example of a prescription in English is

	Gm	or Cc	
Magnesium oxide	10		℥ <sub>iss</sub>
Bismuth subcarbonate	20		℥ <sub>v</sub>
Syrup of acacia			or
Water each in sufficient quantity			
	—	—	—
	To make 200		℥ <sub>viii</sub>

Directions Take 1 tablespoon as required after meals, plain or in water

The same prescription in Latin would be

	Gm	or Cc	
R Magnesium oxid	10		℥ <sub>iss</sub>
Bismuthi subcarbonatus	20		℥ <sub>v</sub>
Syrupi acaciae	q s		or
Aquae destillatae	q s		
	—	—	—
	Ad 200		℥ <sub>viii</sub>

M Sig Take 1 tablespoon as required after meals plain or in water

In Latin prescriptions certain words may be abbreviated

caps (capsula)	elix (elixir)	glyc (glycerum)
cerat (ceratum)	emp (emplastrum)	inf (infusum)
comp (compositus)	enem (enema)	lin (linimentum)
conf (confectio)	flxct (fluidextractum)	liq (liquor)
cort (cortex)	garg (gargarisma)	mist (mistura)
deco (decoctum)	gland (glandula)	ol (oleum)

pil (pilula)	syx (syrupus)	troch (trochiscus)
pulv (pulvis)	tr, tinct (tinctura)	ung (unguentum)
spt (spiritus)	trit (tritura)	vin (vinum)
suppos (suppositorium)		

It is well to avoid abbreviating the names of the drugs themselves. Some abbreviations may be read in various ways if not made clear by the context, for example, "chlor," which may be read "chloralum," "chloridum" or "chloras," "sulf," which may be read "sulfur," "sulfidum" or "sulfas", and "ext col," which may be read "extractum colchici" or "extractum colocynthis."

The American Medical Association Press has adopted certain rules with a view to increasing the use of metric measurements as they appear in prescriptions. Whenever possible, the metric measurements alone are used or the metric values are given first, followed by the apothecaries'. If the apothecaries' units must for any reason be given first, metric equivalents are always inserted after them. It is particularly bad form to mix two systems of measurement, for example, to state "Dissolve 10 Gm of — in 2 fluidounces of water" or "100 cc contains 30 grains of —."

To avoid confusion, "grams" is abbreviated "Gm," with a capital "G", grains is written in full except when lack of space necessitates abbreviation, in which case "gr," with a lower case "g," is used.

## ENDOCRINE AND PHARMACEUTIC NOMENCLATURE

Progress in the use of endocrine preparations and of anti-infective agents has been so rapid that there is much confusion in the minds of physicians concerning the use of these preparations, their sources and potencies and their identities. Unless correct nomenclature is used in medical writing and speaking, confusion will continue to exist. The Council on Pharmacy and Chemistry has sponsored numerous reports appealing for a scientific nomenclature. Attention is directed to the 1942 edition of "Glandular Physiology and Therapy" (Chicago: American Medical Association) and to a statement published in 1943 in *The Journal of the American Medical Association* (Oct. 9, pp 351-357) on the naming of endocrine preparations. This report provides a classification which makes clear even the status of products such as

the estrogens, progestins and androgens. It also emphasizes the importance of using correct terminology instead of proprietary names or vague nondescriptive terms. At times it may even be necessary to indicate the source of the endocrine product. For example, is it from the human placenta or from the urine of stallions or of pregnant mares or of pregnant women?

Other Council reports on this subject may be found in *The Journal* and in the Annual Reprint of the Reports of the Council for various years. Because the word "hormone" frequently is applied erroneously, it probably is best to avoid this term and use "endocrine substance" or "principle" or "factor." It also is best to make reference whenever possible to the standardization of these preparations in terms of weight of the active components and not to units.

Other terms widely misapplied are "female sex hormone," "male sex hormone" and "corpus luteum hormone." They should be referred to as "estrogen," "androgen" and "progesterone," and further defined according to their exact nature. Likewise, "thyroid extract" is commonly misused when the writer actually means desiccated thyroid. This is not an extract but simply the dried gland.

When sulfanilamide, sulfapyridine and sulfathiazole were introduced as therapeutic agents, the term "sulfa drugs" was born. There are few more meaningless words than "sulfa"; it has no scientific standing and should never be used even in a popular sense. When a writer wishes to use a broadly descriptive word, reference should be made to "sulfonamide," a term that has meaning and is recognized as being reserved for this new class of chemotherapeutic agents.

Another word that has assumed almost household familiarity is "antibiotic." It is now reserved by the majority of physicians for extracts from substances such as molds, fungi and bacteria, and is applied to drugs such as penicillin, streptomycin and tyrothricin. These three drugs have markedly different properties and describing any one of them simply as an antibiotic would not provide any worthwhile information. There may even be reason, as more knowledge is gained, to mention the type of penicillin under discussion, i.e., penicillin F, G, K, X or whatever other substances may be uncovered.

# Bibliographic Material

## SECURING A BIBLIOGRAPHY

In investigating the literature on a subject, begin preferably with the most accessible indexes. *The Journal of the American Medical Association* publishes at the end of each volume an index of the original articles appearing in its pages and of articles in other periodicals that have been abstracted in *The Journal* during the previous six months. Many of the articles there mentioned will contain references to other articles, these in turn mentioning still others. Thus, more and more references are accumulated, until perhaps one finds an article by a reliable writer who has summarized the literature to the date of his publication.

**The Quarterly Cumulative Index Medicus** If a more complete study of a subject is contemplated, the *Quarterly Cumulative Index Medicus*, published by the American Medical Association, should be consulted. This index was launched in 1916, under the title *Quarterly Cumulative Index*, and it was continued under that title until 1927. At that time it was consolidated with the *Index Medicus*, and the title was changed to *Quarterly Cumulative Index Medicus*. From 1927 to 1931, inclusive, this index was published jointly by the American Medical Association and the Army Medical Library. Since 1932 it has been supported and published entirely by the American Medical Association. In it, all authors and subjects are listed alphabetically, and there is sufficient cross indexing to make the finding of references simple.

This index is published four times a year, the first and third numbers are temporary (bound in paper), and each covers periodicals received during a three month period, the second and fourth numbers (bound in cloth) cover periodicals received during a half-year. Each number is published as soon as possible after the completion of the period it covers. The *Quarterly Cumulative Index Medicus* includes a list of the medical periodicals indexed in it, with full information con-



cerning them, as well as a list of new medical books and a list of publishers. The list of books is arranged by authors, and a subject classification of the same material follows.

**The Index Medicus** The *Index Medicus* was established in 1879 and, with the exception of the years 1899 to 1903, was published continuously until 1927. At that time it was combined with the *Quarterly Cumulative Index*. Originally the *Index Medicus* was published monthly, the references were listed under general headings, such as surgery, physiology and neurology. At the end of a year the individual numbers could be bound, and a general subject and author index was issued for the complete volume. In 1921 a new plan was adopted. From then until 1927, when it ceased publication, this index appeared quarterly, with the subjects arranged in alphabetical order, and at the end of the year an authors' index was supplied for the complete volume.

**The Index-Catalogue of the Library of the Surgeon General's Office** The Surgeon General's library, in Washington, D. C., contains the greatest collection of medical periodicals, pamphlets and books in any medical library in America. In 1948 the library contained approximately 480,950 volumes and 703,750 pamphlets—a total of 1,184,700. In 1876 John Shaw Billings published a specimen sheet of a combined index catalogue with authors and subjects arranged in alphabetical order. Established by act of the Congress of the United States in 1879, the first volume of such an index catalogue was issued in 1880. This work has now reached its fifty-sixth volume and is in its fourth alphabetical set, covering the entire material in the Surgeon General's library. While it is the most valuable medical reference work available, it is never wholly up to date. The volumes come out slowly, and when the last volume of a series is issued the first volume is many years behind. There is in the library, however, a "manuscript" index on file cards which is completely up to date and from which the "Index-Catalogue" is made. In using the "Index-Catalogue," one should bear in mind that it does not contain entries to authors of articles appearing in periodical literature except in the first series; authors are alphabetically arranged under subject only. Alphabetical entries for authors are limited to authors of books and separately published pamphlets.

**How to Secure the Complete Literature.** If the complete literature on a subject is desired, one will do well to begin with the available volumes of the "Index-Catalogue of the Library of the Surgeon General's Office." Having secured the references there listed, one may consult the volumes of the *Index Medicus* and the *Quarterly Cumulative Index* up to recent date and the index to the bound volumes of *The Journal* up to 1916, and then complete the references with the *Quarterly Cumulative Index Medicus*. In various articles on the list thus compiled mention will undoubtedly be made of others. These references may be added to the bibliography.

Seldom is it desirable to review the complete literature on a subject in an article for publication in a periodical. The science of medicine has grown so vastly and its book and periodical literature is so extensive that complete reviews repeat themselves endlessly in the literature.

It is no longer excusable to bolster a report of a case or an article with a compilation of references to all similar cases that have been reported in the literature. The growth of medical literature has made this not only a useless but also an unwarranted task. Reference should be given only to articles that illuminate the subject. Hardly any one detail of a well prepared and well written article will give a better and clearer idea of a writer's methods or foster greater confidence in the accuracy and soundness of his views than well chosen, well arranged, absolutely correct references. References should be given only to articles that have been directly utilized by the author presenting them. To republish long bibliographies taken from other authors is a form of plagiarism which burdens the literature with uninteresting and worthless lists of titles.

### SECURING MEDICAL PERIODICALS

A physician who has access to a good medical library probably will be able to find bound volumes of the most important medical periodicals. If he wants to consult the more recent literature on any particular subject, he may secure periodicals published in the United States by ordering directly from the publishers or by borrowing them from the library of the American Medical Association. *The Journal*

the American Medical Association, with the exception of its own publications. On making proper deposit, a physician also may arrange to borrow from the Surgeon General's library.

#### ARRANGEMENT AND FORM OF BIBLIOGRAPHIC REFERENCES

**Footnotes** In the publications of the press of the American Medical Association, footnotes that refer to the article as a whole are placed on the title page. An asterisk or a dagger is used only when it is necessary definitely to connect the footnote with one author or with a specific part of the title. Ordinarily, an asterisk is used for the first footnote that requires a special designation and a dagger for the second. A dagger is always used, however, for a footnote recording the death of an author. Such a footnote should read "Dr. Brown died on March 10, 1948." When a paper has been read at a meeting of a society, a footnote to that effect should be given.

Examples of footnotes on a title page follow.

#### VITAMIN C AND PIGMENT

THEODORE BROOKS, M.D.

CHICAGO

---

From the Department of Dermatology, College of Medicine, University of Illinois, Service of Dr. F. E. Sampson.

Read before the Section on Dermatology and Syphilology at the Eighty-Seventh Annual Session of the American Medical Association, Kansas City, Mo., May 14, 1936.

#### ANATOMIC FEATURES OF THE CARDIAC ORIFICE OF THE STOMACH

WITH SPECIAL REFERENCE TO CARDIOSPASM

FREDERICK C. LENDRUM, M.D., Ph.D.\*

DETROIT

---

\* Former Fellow in Medicine, the Mayo Foundation.

Abridgment of a thesis submitted to the faculty of the Graduate School of the University of Minnesota in partial fulfillment of the requirements for the degree of Doctor of Philosophy in Medicine.

## PATHOGENESIS OF NONCASEATING TUBERCULOSIS OF THE SKIN AND LYMPH NODES

RALPH R. MELLON, M.D.

AND

LAWRENCE G. BEINHAEUER, M.D.

PITTSBURGH

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*From the Institute of Pathology (Dr. Mellon) and the Department of Dermatology (Dr. Beinhauer) of the Western Pennsylvania Hospital*

Example of a title in which the author's position is given

LAUREN V. ACKERMAN, M.D.

Assistant Professor of Pathology, Washington University of Medicine

ST. LOUIS

MORRIS MOORE, M.D.

Mycologist to the Barnard Free Skin and Cancer Hospital

ST. LOUIS

References to the literature and comments on various matters mentioned in an article that are to be used as footnotes should be numbered consecutively throughout the article, with corresponding superior reference figures in the text. When the same reference is used twice, instead of duplicating the note or using the words 'loc. cit.," it is better to repeat in the text the number of the original note. In the publications of the American Medical Association Press, multiple superior figures are not used. When an author wishes to refer to several articles at one point, he should combine them in one footnote (as in examples 20 and 25 in the list at the end of this chapter—see pages 129, 130) or mention the authors' names individually in the text with one superior figure for each. If several references combined in one footnote are referred to individually later, they may be numbered *a, b*, etc. (examples 26 to 28 of the list—see page 130).

In the publications of the American Medical Association Press, when it is necessary to delete a footnote after the type is set, the superior figure—say 6—in the text should be deleted, so that the

reader will not look to the foot of the page needlessly, and "6 Footnote deleted on proof" should be substituted for the discarded reference. Conversely, if an author finds it necessary to insert a footnote after the type is set—say between 10 and 11—the reference may be numbered "10a" so that the numbers of the following footnotes need not be changed.

A note appended to an article after the type is set, unless a mere footnote, should be considered as part of the text matter and set in 10 point type. If it contains bibliographic references, these should be used as footnotes, numbered consecutively following the last footnote in the text.

Although in the printed article footnotes appear at the bottom of the page on which they are mentioned in the text, in the preparation of the manuscript they should be typed, in double space, on a separate page following the text matter.

**Bibliographies** References are grouped at the end of a paper in the form of a bibliography only when an exhaustive review of the literature has been made on a subject of sufficient importance to warrant such a survey. The references constituting a bibliography may be arranged either alphabetically or chronologically, or in exceptional instances according to some other logical scheme. The alphabetical arrangement is usually preferable, for it makes it easy for the reader to locate an author's name quickly.

**References in Society Proceedings, Discussions and Legends for Illustrations** Footnotes are not used in discussions of original articles or in society proceedings. References should be incorporated in the text, in parentheses. The form used is the same as that for references used as footnotes except that the names of periodicals are italicized.

When a reference mentioned in a legend is cited in the text also the superior figure designating the footnote to the text should be used in the legend instead of repeating the reference (example A, following). When a reference given in a legend is not cited in the text, it should be incorporated in the legend (examples B and C, following). (It cannot safely be numbered consecutively with the footnotes in the text because until the printed pages are made up it is difficult to

determine where an illustration will be inserted ) When one reference is mentioned in several legends but not in the text, it may be possible to include a sentence concerning it in the text and to insert a footnote, a superior figure may then be used each time the reference is cited

The following examples of legends are in the proper form

A FIG 1 *A* is a demonstration of suture method 4, the Halsted presection suture technic, used only on the anterior aspect of the ostium *B* is a demonstration of suture method 5, the ordinary continuous circular through and through suture, which when used anteriorly inevitably causes macroscopic mural eversion, as shown at *a* (Martzloff and Suckow<sup>1</sup>)

B FIG 10 In the middle of the figure is a myelophage (*M*), which is a large vacuolated body, the processes (*P*) of which emanate from the nucleus (*N*) an oligodendrocyte forming a ring around the enclosures of myelin (two dark fragments) This section (Hassin George B Histopathologic findings in a case of superior and inferior poliomyelitis, *Arch Neurol & Psychiat* 5 552 [May] 1921) is from a brain of a patient with so-called superior and inferior poliomyelitis Bielschowsky's stain  $\times 1200$

FIG 1 *A B* and *C*, dorsal views of brains of rabbits showing areas of cortex removed in three experiments *D*, dorsal view of the brain of a rabbit in which the area outlined by a broken line represents the precentral motor area as shown by C Winkler and A Potter (An Anatomical Guide to Experimental Researches on the Rabbit's Brain, Amsterdam W Versluys, 1911) The numbers on the opposite hemisphere indicate points stimulated to obtain movements of (1) the face and jaws, (2) the head and neck and (3) the scapula

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**References in Tables** Frequently bibliographic references for authors are listed in a table Such references cannot be assigned numbers consecutively with those in the text as it is impossible to tell where a table will be inserted on the printed page The plan that has been followed in the publications of the American Medical Association Press is to use in tables the superior figures employed in the text for references there cited and to include in the table itself the references not cited in the text, as shown in table 3, page 126

This plan may result in a slight inconsistency of form The alternative, however—that of including all the references in the table when only some of them are cited in the text—has the disadvantage of failing to indicate to the reader that certain references are mentioned

in the text as well as in the table and of making the table occupy more space

**TABLE 3—Normal Range of Venous Pressure in Adults**

Observer	Method	Range
		Mm Water
Owens L B J Lab & Clin Med III 266 1932	Indirect	35-90
Eyster J E A and Middleton W M Arch Int Med 34 228 (Aug) 1924	Indirect	50-60
Runge H Arch f Gynäk 22 142 1924	Indirect	48-66
Moritz and von Tabora <sup>a</sup>	Direct	40-80
Berghausen O J Med 15 22 1934	Direct	40-80
Caughey <sup>1b</sup>	Direct	40-80

References to periodicals in tables should include the name of the author, his initials, the name of the periodical and the volume, page and year. The title should not be included unless there is special reason. References to books should be in the usual complete form.

The method of inserting in tables footnotes other than bibliographic references will be discussed in the chapter on tables and charts (see page 168).

**Form for References** An incorrect reference may cause the reader to waste much time in looking for an article. It leads, moreover, to the assumption that the author did not actually consult the work but copied the reference. The author should insure accuracy by seeing each article himself and verifying the data. Special attention should be given to the spelling of foreign names and of words in foreign titles. Accents should be included as they appear in the names and titles cited. An English title should be quoted exactly unless there is an error that is obviously typographic. The accuracy of a reference is further substantiated by making it complete.

A complete reference to a book contains the following information (example 5 in the list—see page 129)

- 1 Author's surname and initials
- 2 Title of the book (capitalize all main words)
- 3 Edition
- 4 Place of publication
- 5 Name of the publisher
- 6 Year of publication

- 7 Volume, if more than one has been published
- 8 Page

A complete reference to an article in a periodical contains (examples 2 to 4 in the list—see pages 128, 129)

- 1 Author's surname and initials
- 2 Title of the article (capitalize only initial word and proper nouns)
- 3 Name of the periodical, abbreviated according to the form given in the *Quarterly Cumulative Index Medicus* or written correctly in full (an abbreviation devised by an individual author is likely to lead to confusion)
- 4 Volume
- 5 Page
- 6 Month—and day of the month if the periodical is published more often than once a month
- 7 Year

The year and the volume number may serve as a check on each other. The page number permits quick reference when the volume is at hand. The date is important, especially if the reference is to a recent periodical, which is likely not to be bound. It is useful also if one desires to purchase a number of the periodical, for a publisher prefers to have the exact date of issue rather than the volume and the page. Some periodicals—for instance, the *British Medical Journal* and the *Lancet*—do not use volume numbers except 1 and 2 for each year.

In references to bulletins published by the various departments of the United States government the following information should be included, in this order (examples 39 and 40 in the list—see page 131)

- 1 Name of the author
- 2 Title of the bulletin
- 3 Number of the bulletin
- 4 Name of the department
- 5 Name of the bureau
- 6 Date

References to these and to other bulletins, monographs and reports should be treated as are references to books, without undue use of abbreviations. The exact title should always be given, and the serial number, the name of the series of bulletins or monographs (written correctly in full), the publisher and the date should be included (examples 41 to 43 in the list—see page 131)



A few general principles in regard to form may be mentioned<sup>1</sup>

- 1 Titles of articles and of books are not abbreviated
- 2 If possible titles should be given in the language in which they originally appeared. If for some reason an author wishes to translate the titles into English, however, the translations should be accurate and all the foreign titles should be translated
- 3 Neither italics nor quotation marks are used to distinguish titles of books, articles or periodicals in footnotes, legends or bibliographies
- 4 The names of all the authors should be given unless there are more than four or unless the names cannot be obtained (example 22 in the list—see page 130)
- 5 The number of a periodical usually is not included when the volume number is available
- 6 Words of reference should precede their numerals. Thus "ed 2," "no 8," "series 13"—not "2d ed," "8th no," "13th series"
- 7 Foreign words of reference such as *tome* (volume), *fascicolo* (part), *Seite* (page), *Teil* (part), *Auflage* (edition), *Abteilung* (section or part), *Band* (volume), *Heft* (number), *Beheft* (supplement) and *Lieferung* (part or number), should be translated
- 8 References to abstracts of articles should be included only (1) when the author wishes to show that he has consulted an abstract rather than the original article or (2) when the original article appeared in a journal that is not readily accessible to the majority of physicians. In these instances complete data for the original article should be included as well as the reference for the abstract
- 9 It usually is sufficient to give the number of the first page of the material cited. If, however, an author wishes to give both the first and the last page (as in example 2 of the list—see below), he should use this form for all the references in his article. Occasionally an author wants to give not the page on which the article begins but the specific page on which the material cited appears. If this policy is followed, a note to that effect should be included, for the reader normally expects the page cited to be the first one of the article

In the following list are given examples of the forms used for references of various types in footnotes and bibliographies in the publications of the American Medical Association Press

#### SAMPLE FOOTNOTES

<sup>1</sup> Francis, T., Jr. Transmission of influenza by filtrable virus, *Science* 80: 457 (Nov 16) 1934

<sup>2</sup> Horn, L., and Stengel, E. Zur Klinik und Pathologie der Pickschen Atrophie

<sup>3</sup> The methods indicated are those followed by the periodicals published by the American Medical Association. Other periodicals have individual styles which vary somewhat from those of the contributor should acquaint himself with the form used by the periodical in which he wishes to be submitted

Ueber die nosologische Stellung der Pickischen Krankheit *Ztschr f d ges Neurol u Psychiat* 128 673 701, 1930

<sup>3</sup> Domenech Als na F Benaiges M and Arque P Etude du choc provoqué par l'irrigation péritonéale hypertonique *Compt rend Soc de biol* 114 104 1933

<sup>4</sup> Robinson Will and Parsons Elouise Hemorrhage and shock in traumatized limbs *Arch Path* 12 869 (Dec) 1931

<sup>5</sup> Osler W *Modern Medicine* ed 3 Philadelphia Lea & Febiger 1927, vol 5 p 66

<sup>6</sup> Woodward J *Medical History of the War of the Rebellion* Washington D C Government Printing Office 1879 pt 2 p 869

<sup>7</sup> Rixford E *Surgery of the Lymphatic System* in Nelson Loose Leaf Living Surgery New York Thomas Nelson & Sons 1927 vol 4 p 101

<sup>8</sup> Minot G R *Treatment of Anemia* in Christian H A and Mackenzie J *Oxford Medicine* New York Oxford University Press 1928 vol 2 pt 2 p 649

<sup>9</sup> Juliusberg F in Jadassohn J *Handbuch der Haut und Geschlechtskrankheiten* Berlin Julius Springer 1931 vol 7 pt 2 p 131

<sup>10</sup> Inanition in Pierson G M Bortz E L and others *Cyclopedia of Medicine* Philadelphia F A Davis Company 1933 vol 7 p 236

<sup>11</sup> Soetarius cited by Story W H *The Evil Eye* London Chapman & Hall Ltd 1887 p 161

<sup>12</sup> Goinard cited by Benhamou and Goinard <sup>7</sup>

<sup>13</sup> Carter cited in Nelson Loose Leaf Living Medicine New York Thomas Nelson & Sons 1926

<sup>14</sup> Sherwood M W Suppurative pericarditis with report of a case *M Rec & Ann* 20 5 1926 cited by White R J Purulent pericarditis A report of seven cases *South M J* 25 365 1932

<sup>15</sup> Giorgi E Epidemic scurvy *Pediatrics* 29 66 (Jan 15) 1921 abstracted *J A M A* 76 689 (March 5) 1921

<sup>16</sup> Sutherland C G in discussion on Weir J F and Snell A M Symptoms that persist after cholecystectomy *J A M A* 105 1093 (Oct 5) 1935

<sup>17</sup> Alexander E G Personal communication to the author

<sup>18</sup> Barber R F Unpublished data

<sup>19</sup> Using the Aub-Du Bois standard as a basis for the calculations J J Short and H J Johnson (The increased metabolism of obesity Use and abuse of metabolic stimulants *J A M A* 106 1776 [May 23] 1936) concluded that the total metabolism increases directly with the excess of weight

<sup>20</sup> Evans H M Meyer Karl Simpson M E and Rechart F L Disturbance of carbohydrate metabolism in normal dogs injected with the hypophyseal growth hormone *Proc Soc Exper Biol & Med* 29 857 (April) 1932 Housay B A and Basott A Carbohydrate metabolism and diabetes *Endocrinology* 15 511 (Nov Dec) 1931

<sup>21</sup> McKenzie Dan Diffuse osteomyelitis *J Laryng & Otol* 28 6 79 and 129 1897

- <sup>22</sup> Scholl, A J, and others A review of urologic surgery, *Arch Surg* 31 315 (Aug), 477 (Sept) 1935
- <sup>23</sup> Lippard, V W, and Johnson, P Beta hemolytic streptococcal infection in infancy and in childhood I Antifibrinolysin and antistreptolysin response, *Am J Dis Child* 49 1411 (June) 1935, II Effect of transfused blood and of streptococcal antiserum on the concentrations of antifibrinolysin and antistreptolysin in the blood of the recipients, *ibid* 49.1430 (June) 1935
- <sup>24</sup> Wile, U J Visceral syphilis Syphilis of the stomach, *Arch Dermat & Syph* 1.543 (May) 1920 Grund, J L Efficacy of bismarsen in Wassermann fast syphilis, *ibid* 26 1074 (Dec) 1932
- <sup>25</sup> David, V C *Surgery of the Rectum and Anus*, in Lewis, Dean *Practice of Surgery*, Hagerstown, Md, W F Prior Company, Inc, 1930 vol 7, chap 6, p 11 Jones, D F, and McClure, W L Peritoneum, *ibid*, vol 7 chap 8, p 23
- <sup>26</sup> (a) Birch, T W, and Dann, W J Estimation and distribution of ascorbic acid (vitamin C) and glutathione in animal tissues, *Nature*, London 131 469 (April 1) 1933 (b) Von Euler, H, and Malmberg, M Ueber die antiskorbutische Wirkung der Augenlinsen und über ihren Gehalt an Reduktionen und Sulfhydrylen, *Ztschr f physiol Chem* 230 225, 1934
- <sup>27</sup> Barber H H, and Kolthoff, I M (a) A specific reagent for the rapid gravimetric determination of sodium, *J Am Chem Soc* 50 1625 (June 5) 1928 (b) Gravimetric determination of sodium by the uranyl zinc acetate method II Application in the presence of rubidium, cesium, potassium, lithium, phosphate or arsenate, *ibid* 51 3233 (Nov 8) 1929
- <sup>28</sup> Benedict, F G, and Root, H F Insensible perspiration Its relation to human physiology and pathology, *Arch Int Med* 38 1 (July) 1926 *Ginandes and Topper* <sup>29a</sup> Osler, <sup>29b</sup> p 69
- <sup>30</sup> Kirk, E Amino acid and ammonia metabolism in liver disease, *Acta med Scandinav*, 1936, supp 77, p 1
- <sup>31</sup> Bjørn Hansen, H Leukozyten-Untersuchungen bei den Masern, *Acta pædiat* (supp 1) 14 1, 1932
- <sup>32</sup> Pavlov, I P *Conditioned Reflexes*, translated into English and edited by G V Anrep, London, Oxford University Press, 1928
- <sup>33</sup> Kauffman, Edward *Pathology for Students and Practitioners*, translated by P Reimann, Philadelphia, The Blakiston Company, 1929, p 552
- <sup>34</sup> Merle, F *Etude sur les épendymites cérébrales*, Thesis, Paris, no 305, 1910
- <sup>35</sup> Veil, P *Les tumeurs noeuves des paupières et de la conjonctive (contribution à l'étude anatomopathologique et clinique des tumeurs du limbe sclérocornéen)*, Thesis, Paris, no 206, Paris, A Legrand, 1925
- <sup>36</sup> Pollock, B E *The Effect of Carbon Arc Radiation on the Cardiac Output in Dogs*, Thesis, Tulane University Graduate School, 1933
- <sup>37</sup> Milhorat, A T, and Wolff, H G *Studies in muscle disease I The metabolism of creatine and creatinine in progressive muscular dystrophy*, *Arch Neurol & Psychiat*, to be published

- <sup>37</sup> Richards, A. N. Processes of Urine Formation in the Amphibian Kidney, in Harvey Lectures, 1934-1935, Baltimore, Williams & Wilkins Company, 1936
- <sup>38</sup> Hoffman, F. L. The Problem of Dust Phthisis in the Granite-Stone Industry, Bulletin 293, United States Department of Labor, Bureau of Labor Statistics, 1922
- <sup>39</sup> Jones, E. T. Growth and Development, in Annual Report, United States Department of Agriculture, Bureau of Animal Industry, 1911, p. 157
- <sup>40</sup> Sundwall, J., and Francis, E. Studies in Pellagra, Hygienic Laboratory Bulletin 106, United States Public Health Service, 1917
- <sup>40a</sup> Coblenz, W. W., and Emerson, W. ■ Glasses for Protecting Eyes from Injurious Radiations, Technologic Paper 93, United States Department of Commerce, Bureau of Standards, 1917
- <sup>41</sup> Benedict, F. G., and Talbot, F. B. The Gaseous Metabolism of Infants, with Special Reference to Its Relation to Pulse-Rate and Muscular Activity, Publication 201, Carnegie Institution of Washington, 1914
- <sup>42</sup> Pearce, Louise. The Treatment of Human Trypanosomiasis with Tryparsamide, Monograph 23, Rockefeller Institute for Medical Research, 1930
- <sup>43</sup> Mackay, H. M. M. Nutritional Anaemia in Infancy, with Special Reference to Iron Deficiency, Medical Research Council, Special Report Series, no. 157, London, His Majesty's Stationery Office, 1931
- <sup>44</sup> Wound Shock and Haemorrhage, Medical Research Committee, Special Report Series, no. 25, London, His Majesty's Stationery Office, 1919

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## Preparation of the Manuscript

The general appearance of a manuscript has a psychologic effect on an editor. A manuscript carelessly arranged, without pagination composed of sheets of various sizes, with additions written on slips pinned or clipped to the pages or with corrections made without regard to neatness or to clarity may prejudice the reader who is to pass on its merits. Slovenly preparation has caused the return of numerous manuscripts which otherwise might have been accepted.

Authors may well devote some time to learning the rudiments of printing. Such knowledge helps in the preparation of the manuscript and saves many needless corrections. Authors, however, should not attempt to specify type to a competent printer, any more than the physician expects a patient to specify the diagnostic tests to be used.

**Size of the Paper** The standard size of paper adapted to the ordinary typewriter, typesetting machine or filing case is 8 or 8½ by 11 inches (19 by 28 cm). At least 90 per cent of the manuscripts received in the office of the American Medical Association are typed on paper of this size, the paper used for the other 10 per cent varying from small note size to foolscap or larger.

**Original or Carbon Copy** The original copy of a paper should be submitted if possible. If the original copy is not available, a first carbon copy on paper of good quality should be acceptable. There are practical reasons why editors prefer good, clean copy. Each manuscript is read by at least one editor and then, in turn, by the copy editor, the typesetter and the proofreader or the copyholder. With the exception of the editor, each of these must observe spelling, punctuation, capitalization and grammatical construction. The wise author will retain a carbon copy and compare it with the proof to discover whether any liberties have been taken with his manuscript. In this manner, he may find some faults in his writing and, indirectly, secure criticism which may prove of aid in the future.

**Typing the Manuscript.** A manuscript typed in single (close) space is objectionable. No matter how well the paper is written or how carefully it is prepared, the keen eye of the copy editor may find typo-

graphic errors, misspelled words, grammatical slips or what not that require interlineation. These and other corrections are made with difficulty on closely typed manuscripts (see figure 1). It is as easy to type a manuscript in double as in single space, it merely requires a little more paper. Liberal margins should be left at the sides to permit editing and corrections. The author should utilize these margins to indicate the proper placement of illustrations, tables, charts, etc. One inch (2.5 cm) margins usually suffice. No marks of any kind should be made on the reverse side of the manuscript page.

**Neatness.** Illegibility, smudging or other marked defects in the preparation of a manuscript may give the impression that the research or observation described in the article was equally slipshod and inaccurate and may turn the scale against its acceptance.

A manuscript should be folded, not rolled. When it consists of too many sheets to permit of easy folding, it should be sent flat.

**Author's Name.** The name and address of the author should appear on each page of the manuscript and on each illustration, chart and table. Typed on page one should appear the title of the article, the author's name and degrees, his appointments and his address. This information should follow as closely as possible the style of articles in the publication to which the manuscript is to be sent. The various items should be separated by sufficient space to permit indication of type sizes and corrections. A 3 inch (7.5 cm) margin at the upper edge of the first page should be allowed, as printing instructions are written there by manuscript editors. An example follows.

## A REVIEW OF FOUR HUNDRED AND FORTY CASES OF PELLAGRA

V. P. SYDENSTRICKER, M.D.

AND

E. S. ARMSTRONG, M.D.

AUGUSTA, GA.

From the University of Georgia School of Medicine and the University Hospital

The author's office or residence address (street and number) may be placed at the end of his article if he wishes to include it.

## Preparation of

The general appearance of a manuscript can make or mar an editor. A manuscript can be composed of sheets of various sizes, pinned or clipped to a board, or regard to neatness pass on its merits. Numerous manuscripts have been rejected by the printer and the author.

These experiments show that

less diminution of the sugar in the

than <sup>of that</sup> in the urine; The first effect of

the pancreatic secretions was to render

the kidney less permeable <sup>to sugar</sup>. These experi-

ments <sup>are significant</sup> constitute the first demonstration

that an internal secretion of the pan-

creas can check <sup>already established</sup> a diabetes, but this was

accomplished, <sup>however,</sup> under ~~such artificial con-~~

~~so far removed from anything which can be realized in~~

ditions <sup>with pancreatic extracts</sup> that an effective treatment of <sup>therapeu-</sup>

human diabetes seems more remote than ever.

FIG. 2 Wide spacing and ample margins give opportunity for legible correction

<sup>produced</sup>  
<sup>complete,</sup> The diabetes, in animals by complete <sup>or almost</sup>  
 removal of the pancreas so closely re-  
 sembles human diabetes in ~~all~~ its essential  
 features that it seems reasonable to hope  
 that any method which will cure the for-  
<sup>of use</sup>  
<sup>g</sup> mer will ~~also~~ be ~~useful~~ <sup>against</sup> in the latter;  
 Any light which may be obtained on the  
<sup>g</sup> experimental form<sup>g</sup> will ~~also~~ help to a  
 better understanding of the human disease.

FIG 3 The only serious fault to be found with this manuscript is that it has been corrected as if it were proof and therefore is unnecessarily hard to read

<sup>produced</sup>  
<sup>complete,</sup> The diabetes, in animals by complete <sup>or almost</sup>  
 removal of the pancreas so closely re-  
 sembles human diabetes in all its essential  
 features that it seems reasonable to hope  
 that any method which will cure the for-  
<sup>of use against</sup>  
 mer will ~~also~~ be ~~useful~~ in the latter;  
 Any light which may be obtained on the  
 experimental form<sup>g</sup> will ~~also~~ help to a  
 better understanding of the human disease.

FIG 4 This manuscript has been corrected properly



**General Rules** Some important suggestions with respect to the preparation of a manuscript follow

- 1 Use unglazed white paper of good quality
- 2 Type in double space on only one side of the paper
- 3 Type tables on separate sheets as these usually are set on a different typesetting machine than the text. Indicate in the margin of the text where each table should be inserted
- 4 Type footnotes (also in double space) on separate sheets at the end of the article or chapter. Be sure they agree in number with their respective references in the text
- 5 Type legends for illustrations on a separate sheet at the end of the manuscript. Number the legends in sequence to agree with the illustrations
- 6 Type quoted material single space, it will be set in a type size smaller than that used for text, and the opening and closing quotation marks will be omitted. Obtain written permission from the publisher
- 7 Number sheets in consecutive order in the upper right hand corner
- 8 Fasten sheets together with pins, clips or other easily removable fasteners. Do not submit manuscripts that have been permanently bound, as this makes for difficult handling by editors and compositors
- 9 Do not paste, pin or clip illustrations to manuscript. Do not write heavily on the backs of photographs so that the impression will show on the reverse side. If necessary for identification write lightly in the margin
- 10 Number the illustrations in sequence and indicate in the margin of the text where they are to be inserted
- 11 Indicate paragraphs clearly, either by the usual indentation or by the use of the paragraph mark, ¶
- 12 Make all corrections on manuscript in ink, preferably black or blue black. Do not use pencil or colored crayon
- 13 Put any necessary corrections between the typewritten lines of the manuscript, using a caret to indicate place of insertion. Retype any sheet bearing numerous corrections
- 14 Draw a horizontal line through words or phrases to be deleted. If several paragraphs or pages are to be eliminated, draw an oblique line through such matter

15 If several pages are omitted from the manuscript, the pages should be either renumbered or so numbered at the top as to indicate the omission. For example, if three pages are omitted (pages 25 to 27), the page following 24 may be marked "25-28." If a page is inserted—say between pages 5 and 6—it may be marked "5a" with the notations "Page 5a follows" made at the bottom of page 5 and "Page 5a precedes" made at the top of page 6.

16 Mark off by brackets any material to be transposed from one portion of the manuscript to another, indicating the transposition by the notation "Transpose to page —." On the latter page, clearly indicate where the transposed material is to be inserted, with the notation "Insert from page —."

17 Write the word "End" at the bottom of the last page of the manuscript. Also state at this point whether or not there will be an index.

18 Submit the original typing to the publisher, retaining ■ carbon copy for comparative reading.

## Illustrations

Good pictures are eloquent, frequently one small illustration will convey more to the reader than could be explained in several pages of text matter. Such an illustration nearly always has evolved from a thorough understanding of the material and a well chosen attitude from which to present it. Many authors, however, submit huge numbers of illustrations with their manuscripts, regardless of whether or not the pictures are necessary to bring out adequately the points made in the text and even regardless of whether they bring out any point at all. Few journals can afford to reproduce large numbers of illustrations. Therefore, unless the author is willing to contribute toward the costs of reproduction of his illustrations, he should curtail the use of pictures as much as possible, selecting for reproduction only those which he feels are required to illustrate points to be emphasized. Care in planning illustrations will reduce their number materially, and the omission of extensive backgrounds will reduce the size of the finished engraving, which governs its cost.

Readers of scientific journals may be assumed to be familiar with the normal appearances, gross and microscopic, of the various organs, hence illustrations of normal conditions should be used only when required for the sake of contrast. The first rule regarding illustrations, therefore, is that they should *illustrate*. Only after this function has been fulfilled may the artistic elements be considered.

### PREPARATION OF ILLUSTRATIONS

In preparing illustrations for publication, the author should consider the size of the type column and the size of the page of the periodical in which the article may appear. The illustrations should be of a size that, with reasonable reduction, can be accommodated to the type column.

Sometimes pictures can be grouped to advantage, thus permitting saving of space and expense. For instance, three blocks  $2\frac{1}{4}$  inches (6.3 cm) wide by 3 inches (7.5 cm) high will cost more than one

block in which the same three illustrations are combined. Two of the pictures could be placed side by side, making a cut less than 5 inches (12.5 cm) wide, and the third block centered above or below. Figures 5-10 show how and how not to group illustrations.

A better appearance is secured if single pictures or groups of pictures are higher than they are wide, as is the page of most periodicals.

A column in *The Journal of the American Medical Association* is 3½ inches wide and a two column format is used; drawings should be planned to require no more than 30 per cent reduction to bring them down to proper width (see figure 11).

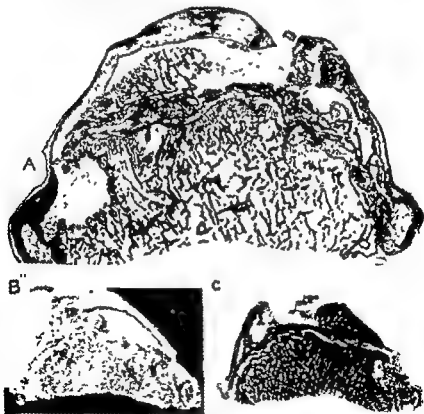


FIG. 5 A photograph (B) and a roentgenogram (C) are combined with a photomicrograph (A) of a section of the head of the femur. The grouping facilitates comparison of the three pictures and conserves space, hence lowers cost. "A," "B" and "C" made as separate cuts would cost about 20 per cent more than the arrangement shown. The photographer can make his prints the proper size for such a combined mounting.

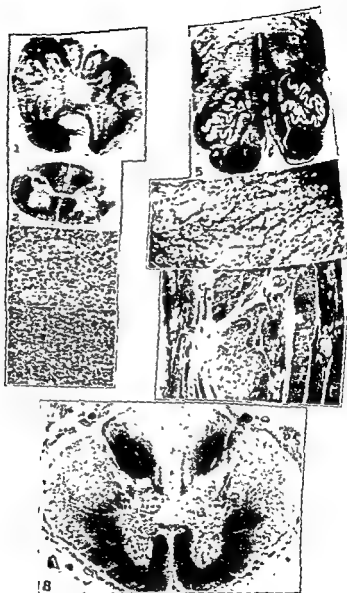
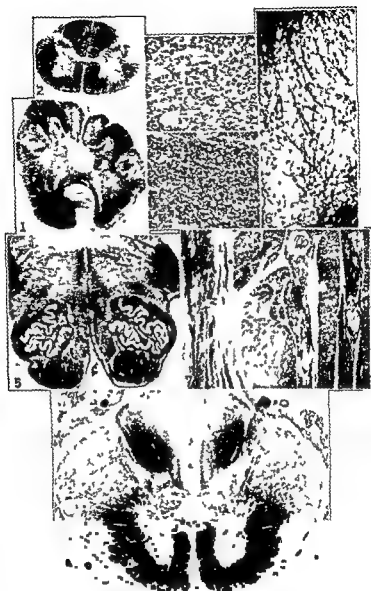


FIG. 6 When sections of various sizes and shapes are combined at random, there is no symmetry



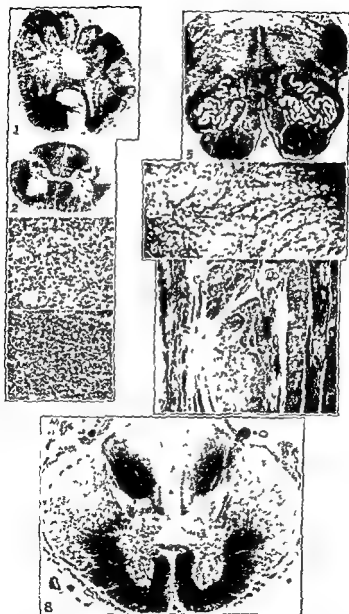
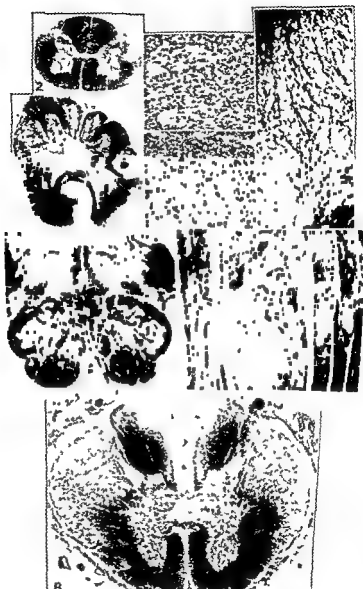


FIG. 6 When sections of various sizes and shapes are combined at random, there is lack of symmetry





Illustrations should be suitably numbered and their position in the manuscript should be indicated even though it is not always possible for the printer to follow these directions implicitly. The number of the picture and the name of the author should appear on



FIG. 8 The use of the small inset on an unimportant area of the picture makes the overall cost of one illustration cover both.

each, and the top should be marked. Labels for identification of illustrations may be procured from the headquarters office of the American Medical Association. On these labels space is provided for the names of both the author and the journal in which the article is intended to appear, the number of the figure and any instructions concerning reduction or reproduction that it is deemed desirable to furnish. It is inadvisable to write on the back of a photograph, since this may mar its surface. If, however, labels are not available and it is necessary to write on the back for purposes of identification, a soft pencil should be used and little pressure applied.

Since medical illustration in recent years has attained such a high standard of perfection, any article illustrated by amateurish pictures suffers by comparison with the other articles in almost any journal. This is also true of photography. Competent medical illustrators are available in nearly every large city today, if not, artists can be recommended by the editors or publishers. Early consultation between author and artist will result in useful illustrations.

When the illustrations constitute a major part of a paper, their suitability to a simple type of reproduction may be a factor in the acceptance or rejection of the manuscript. Here the experienced artist,

familiar with photoengraving methods, can render substantial aid to both author and publisher

The artist should be given all available information concerning the journal in which the article is planned to appear. Page size, column width, etc., are important in planning the drawing size and the amount of reduction necessary.

Mounting photographs and drawings with rubber cement on white cardboard, leaving some margin all around, provides a place for editorial or photoengraving notes besides protecting the material from damage. If these cardboard mounts are uniform in size, the packaging of a number of illustrations is simplified.

Clips or pins should not be used to fasten photographs, particularly glossy prints. They leave impressions or holes in the photographs which cannot be eradicated in reproduction.

Illustrations should be sent flat—never rolled or folded—and protected with cardboard. A crease made in folding cannot be eradicated in the process of reproduction and will mar the surface of the picture.

#### LABELING ILLUSTRATIONS

After the illustration has been prepared, the author should make certain that the significant points are clearly apparent and that they will come to the attention of the reader. Special attention can be called to these points either by a special reference in the legend to appear under the picture or by lettering placed on the photograph itself.

Letters, words and numbers placed on the surface of the picture should be sufficiently large to be legible when reduced to the size indicated and should be neatly made with a view to securing a pleasing appearance after reproduction, hence a plain, open-faced style is preferred.

Judicious use of labels incorporated in the drawing and fully spelled out should not detract from the appearance of the drawing. The use of coded labels (*a*, *b*, *c*, etc., or 1, 2, 3, etc.) with their interpretation in the legend under the illustration is apt to discourage the careful study of the picture by causing the eyes to be constantly shifted (compare figures 12[A] and 12[B]).

Labels should be placed so as to require as little extra space as possible, and thus not increase the cost of reproduction. It is generally desirable, therefore, to place black letters on unessential white areas within the picture or white letters on black areas, making the dotted lines and the lettering come entirely within the body of the photograph.

When abbreviations in labels are necessary, only standard ab

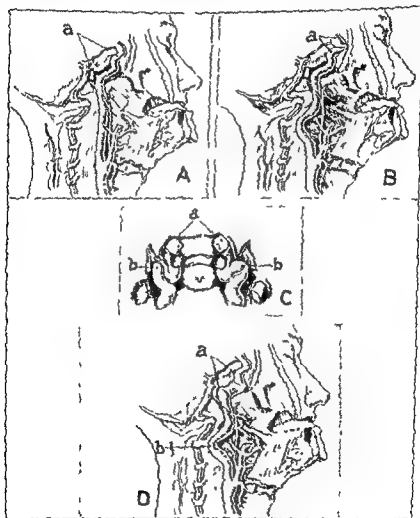


FIG. 9 These drawings and their lettering are satisfactory enough but the label on "D" should have been trimmed to match "A" and "B" before mounting. This wastes too much space, as may be seen by comparison with figure 10.

breviations should be used (m, a, v, n, for muscle, artery, vein, nerve respectively, and inf, sup, int, ext, in anatomic terms are acceptable) Consistency in the use of some standard terminology will add to the value of a series of illustrations, especially since these same illustrations may later be borrowed by other authors

The lettering may be done by a competent draftsman, or printed characters may be obtained to be pasted on the illustrations These characters, however, while usually satisfactory from the point of view of appearance, do not always adhere to the illustration—particularly to a glossy surface Sometimes they are lost after the pictures pass through the editorial office, and the loss is not detected until the author receives the proof Any insertions or changes after the blocks have been made require the making of a new block and mean added expense

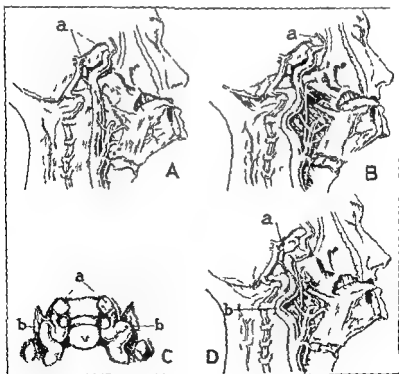


FIG. 10 Both space and expense are saved by the proper mounting of the pictures shown in figure 9

Perhaps the best method of marking points to be indicated by guide lines and side labels is to cover the illustration or photograph with a sheet of tracing paper, transparent enough to be easily seen

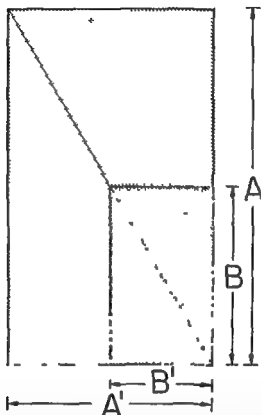


FIG. 11 Reduction of illustrations is always based on linear dimensions. When light area measuring  $A \times A$  is reduced one half to size  $B \times B$  the resulting area is one fourth of the original. This figure shows the use of shading film. Area  $1 \times 1$  is single thickness while area  $B \times B$  is a double thickness of the same pattern. The overlapping of the films can produce a wide variety of patterns.

through, on which the author may mark his choice of those structures to which the reader's attention is to be called. This permits the editor to use either the side or the top or bottom margin for the lettering necessary to identify the structures. If guide lines have already been ruled on the illustration by the author, it frequently happens that

not enough space has been left for the text at the end of each line (see figure 13)

### LEGENDS

A full descriptive legend to be placed to be provided. The legends should be numbered and correspond with the pictures and should be placed at the end of the manuscript, not on the same sheet. The legends should be given the same care in composition as the material in the body of the article. The legends should bring out all the important points brought out by the pictures. Each of the letters, numbers, arrows or other marks on the picture.

### PERMISSIONS

Many people object to having their pictures in scientific periodicals. The author of an article containing a photograph either should secure from the publisher for publication and inform the editor of the article is submitted that written permission should be secured. The face in the portrait by India ink or by pasting over them pieces of paper. If pictures depicting conditions about which the patient has written consent to the use of the pictures should be secured since the picture would be used.

When photographs are submitted as illustrations, the author must be informed that retouching is not allowed. Careful retouching by a competent person is necessary. The contents of other photographs whose details do not fit with the case yet too vague to be useful.

Frequently an author wishes to use pictures that have been published elsewhere. In such cases, the author should secure written permission from the publisher since the better periodicals make a statement that written permission has been secured. The author should accompany the manuscript when it is submitted.

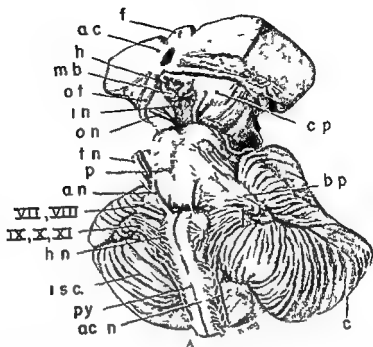


FIG 12(A) (ac) Anterior commissure (an) abducent nerve (acn) accessory nerve (bp) brachium pontis (c) cerebellum (cp) cerebral peduncle (f) fornix (h) hypothalamus (hn) hypoglossal nerve (in) interpeduncular nucleus (isc) inferior surface of cerebellum (mb) mamillary bodies (on) oculomotor nerve (ot) optic tract (p) pons (py) pyramid (tn) trigeminal nerve (VII VIII IX X XI) 7th 8th 9th 10th 11th cranial nerves

Use of abbreviated labels forces reader to shift from figure to legend for interpretation. Compare this with figure 12(B). (Courtesy Krieg: *Functional Neuroanatomy* (with modified side labels) Philadelphia: The Blakiston Company.)

the publisher will be put to the trouble of asking the author if such permission has been granted, and this usually causes delay in publication. Complete information (see chapter entitled "Bibliographic Material" for definition of a complete reference) concerning the source of the illustrations should be included, either in the legend or in a footnote. The author should be sure that borrowed illustrations do not contain contradictions to statements made in his paper.

#### CHOICE OF MEDIUM FOR REPRODUCTION

**Zinc Line Engravings** Line drawings made with pen and ink on bristol board or black lithograph pencil on rough or stipple paper can be reproduced as zinc line engravings, which cost from a half to a third as much as halftones (see figure 14). Drawings of this sort

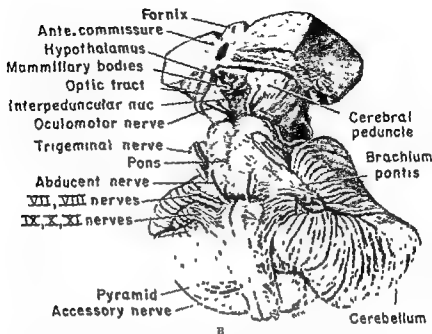


FIG. 12(B) Here the reader finds each structure with its name close at hand. The vertical column space occupied by this figure is the same as figure 12(A), opposite and the space taken up by the legend below figure 12(A) has been saved here. (Courtesy, H. R. Functional Neuroanatomy, Philadelphia: The Blakiston Company.)

must be made with pure black ink, or, in the case of lithograph pencil, the strokes must be placed firmly so as to produce pure black patterns. Shading on such drawings must be made by lines, cross hatching or stippling, or by the use of Ben Day tints or shading film (see figure 11) (See page 146.)

**Halftones.** Photographs or drawings that have been prepared properly lend themselves to satisfactory reproduction by the halftone process. This method must be used if lines of tones intermediate between black and white are used in drawing. (See pages 144-145.)

### ZINC LINE ENGRAVINGS

Zinc line engravings are used in the reproduction of line drawings (see figure 14) and of printed matter appearing in black and white. The original drawing is preferred to a photograph of it, since some of the clearness and detail are lost each time an illustration is submitted to a photographic process.



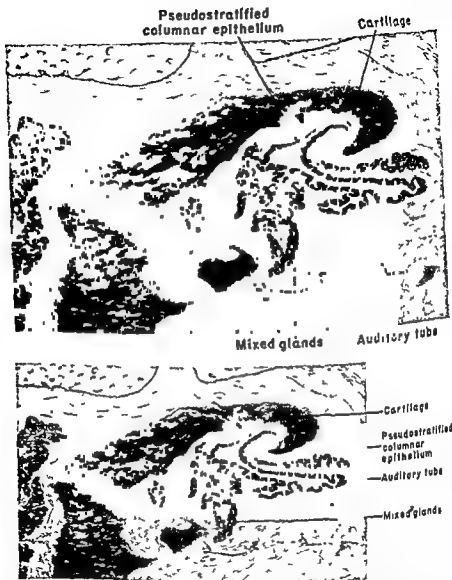


FIG. 13 The upper and lower parts of this figure demonstrate proper and improper use of guide lines. On the lower figure the guide lines had already been drawn in ink, making it necessary to reduce the drawing in order to provide space for labels. In the upper figure full column width is available for the illustration, the labels being fitted in above and below the photomicrograph.

Drawings made with ordinary lead pencil are rarely reproduced satisfactorily by this method, as a rule they must be returned for redrawing or be reproduced by the halftone process

The process of reducing will soften the drawing and give the reproduction a more finished appearance Drawings should be neatly done, straight lines should be made with a ruler and circles with a compass The average physician, not having had the training of a draftsman, usually is not competent to make creditable drawings Therefore, most medical periodicals cooperate with the author by having a competent artist do the work for him from a rough sketch that may be submitted (see figures 15 and 16)

### HALFTONE ILLUSTRATIONS

The halftone process is used for the reproduction of charts and drawings with gray shading and of photographs—patients, tissues and appearances under the roentgen rays

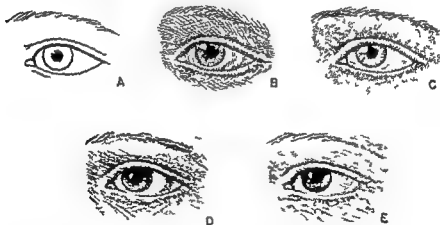


FIG 14 Various art techniques suitable for reproduction by the zinc line engraving process

- (A) Simple outlines of structures
- (B) Lines and cross hatching for differentiation of parts
- (C) Stippling to explain form by light and shade
- (D) Lithograph pencil on rough paper with corneal reflex painted in with Chinese white
- (E) Lithograph pencil on no. 1 Rosk Supple Board In this drawing the iris of the eye was painted solid black and by lightly scratching the tops of the supples a much darker tone was produced than could be secured by pencil alone The corneal reflex has been scratched out

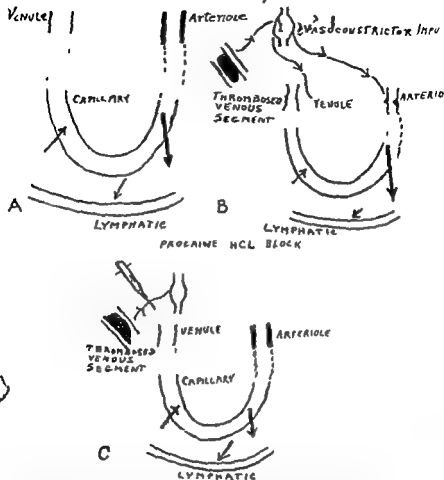
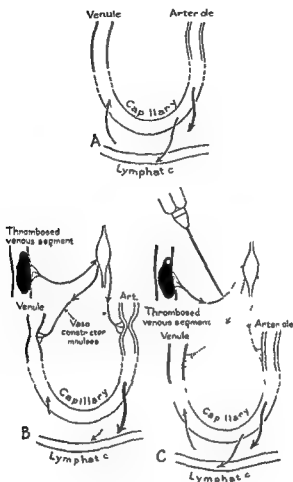


FIG 15 This drawing submitted for publication obviously is the author's attempt at illustration. Functionally it is almost adequate but lacks clarity of expression. In another sense it is a communication of an idea sound enough in itself but needing revision of its grammar to convey its meaning.

The ideal photograph is a perfect print on paper with a glossy finish. Tone drawings with few or no hard black lines usually result in good illustrations by the halftone process.

Halftone engravings are made in two major styles: *square finish cuts*, in which the background is left with its light gray tint made up of tiny dots, and *outlined cuts*, in which the engraver cuts this background away. This latter process is much more expensive since it is hand work, and if the background contains any lettering the engraver

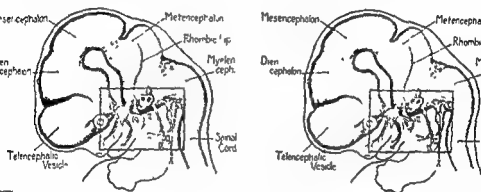


tory diagram

must work around it very carefully To escape this the engravers resort to *combination plates* which are actually a combination of two films—one of the halftone, outlined, the other a strong contrast film of the lettering, the two being carefully superimposed and the plate etched This method, while producing attractive plates, has, besides its added expense of hand work, a very definite hazard, for the illus-

tration's outlines, which may have been soft and hazy in the original, now emerge very sharply contrasted to the white paper and sometimes upset the balance of light and shade which the artist worked hard to achieve. Then, too, the engraver, not being familiar with the subject matter, may unwittingly distort the outlines (See figures 17[A] and 17[B].)

When unusual contrast is deemed desirable by the author, a method of reproduction called *dropped highlights* can be employed.

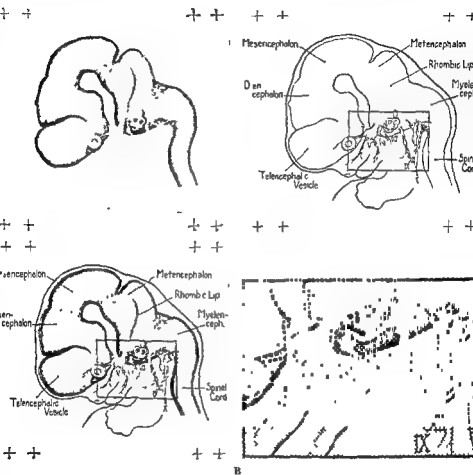


A

FIG 17(A) The halftone process of reproduction (Upper left) "Square finish" plate with "screen" over entire picture, lines and lettering (Upper right) "Combination" plate, on

plate (lower right).

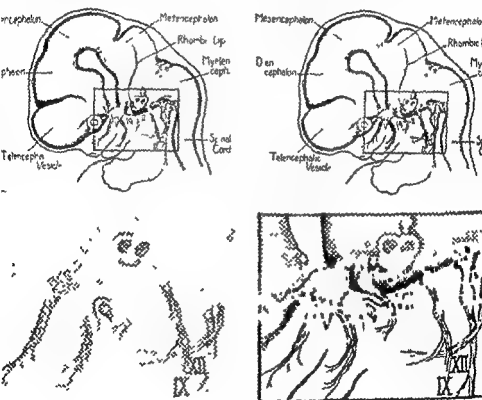
Cuts made by this method, however, cost three times as much as regular halftones and the author may be asked to bear part of the costs—in other words, all over and above the cost of regular halftones



area and exactly traced on the overlay. The drawing and overlay are photographed separately by the engraver who then strips the "line" film over the halftone film and etches the plate. The figure on the lower left shows the result of this method, while the lower right illustration is an enlargement of the rectangle in which may be seen the solid blacks of the lines and lettering.

tration's outlines, which may have been soft and hazy in the original, now emerge very sharply contrasted to the white paper and sometimes upset the balance of light and shade which the artist worked hard to achieve. Then, too, the engraver, not being familiar with the subject matter, may unwittingly distort the outlines (See figures 17[A] and 17[B].)

When unusual contrast is deemed desirable by the author, a method of reproduction called *dropped highlights* can be employed



A

FIG 17(A) The halftone process of reproduction. (Upper left) "Square finish" plate with "screen" over entire picture lines and lettering. (Upper right) "Combination" plate, on which the halftone is confined to the picture, while the lines and lettering outside are solid blacks. The engraver has mechanically removed all "screen" from the background before superimposing the "black" film over the "halftone" film prior to etching. (Lower left) An enlargement of the area shown in the rectangle of the "square finish" plate to show the over all screen. Compare this with the same rectangle enlarged from the "combination" plate (lower right).



FIG. III The blurred and dull background seen in A was painted out so that in B there is nothing to detract from the lesion.





FIG 19 The inclusion of chair and table in the foreground distracts attention from the patient and necessitates so much reduction that the lesions on the man's back are barely visible

and, in addition, important details are lost in the process. Hence a better illustration results if made from the actual film.

In preparing the roentgenogram, the experienced roentgenologist will mark it to identify the essential points. The markings, however, should not be so obtrusive as to mar the effect of the complete reproduction. The points of importance may be suitably identified by the insertion of lines on the roentgen ray film (see figure 26).

To the physician who secures it, and to the reader, the roentgen ray photograph is actual evidence of the facts brought out in the case report. If an author is trustworthy and reliable, he need not provide actual evidence for his reader, but he should select his roentgenograms on the basis of new points to be brought out in the specific case. It is unnecessary to include six roentgenograms to illustrate a niche in the

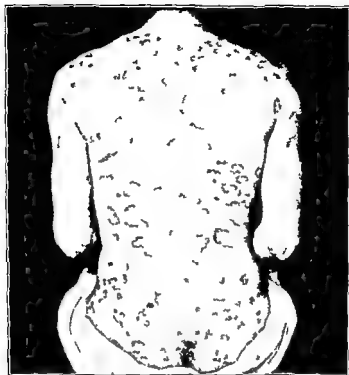


FIG. 20 In this photograph of the patient seen in figure 19 the lesions are emphasized

stomach as it occurred in six cases unless something distinctly new is to be presented concerning each of these niches. In a paper describing a method of making the ureters, the kidneys or the gallbladder visible by the injection of an opaque substance it is unnecessary to have more than one or two pictures showing the results of the process. Obviously the best in the series will be selected. The author may then state in his text that 18 or 20 similar plates were prepared.

A study of the medical periodicals received at the headquarters office of the American Medical Association and also of manuscripts submitted indicates clearly that an undue amount of both money and labor is being expended on the reproduction of superfluous roentgenograms. In certain instances the details to be brought out by a roentgenogram are visible on the original plate but so much is lost in reproduction that the illustration is practically worthless.

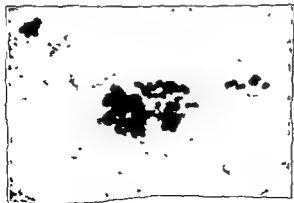
such instances it is better to submit a diagrammatic outline of the roentgenogram to be published with the roentgenogram or by itself and to state in the legend that it is made directly from the original roentgenogram. Obviously only the parts of a roentgenogram which



FIG. 21. On the left are shown flashbulb photographs of a patient while on the right are drawings made from these photographs and from the roentgenogram in which the artist has emphasized the details. The author decided to show drawings and photographs together, the latter serving to authenticate the former. (Courtesy Dorrance The Operative Story of Cleft Palate Philadelphia W. B. Saunders Co.)



22. This photomicrograph was  $7\frac{1}{2}$  inches (19 cm) high. Reduction to a height of  $4\frac{1}{2}$  inches (11.5 cm) has resulted in loss of both detail and clarity.



23. The significant portion of the photomicrograph shown in figure 22 has been reproduced with  $\times 1000$  magnification.

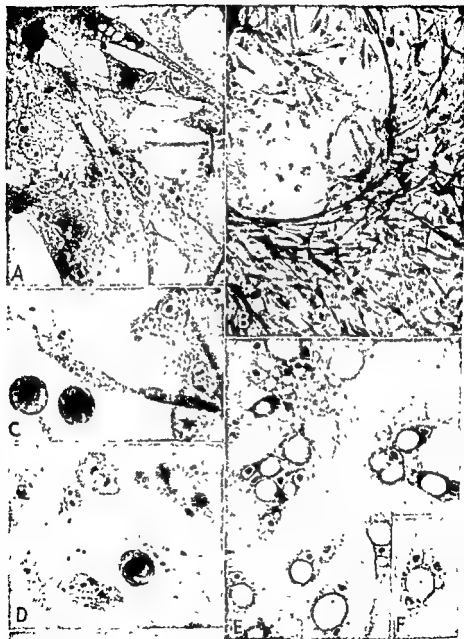


FIG. 24. An example of effective grouping of photomicrographs. Note the inset in the lower right corner.

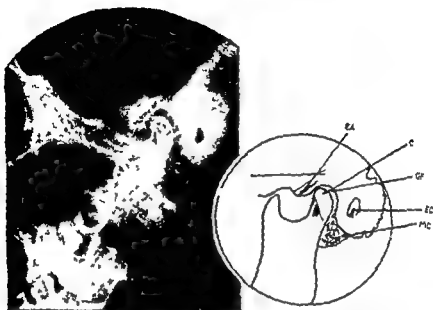


FIG 25 The use of a diagrammatic drawing to clarify a roentgenogram for the reader. The use of abbreviations is not desirable but sometimes is necessary (Courtesy Miller Oral Diagnosis and Treatment Philadelphia The Blakiston Company)

are necessary for the identification of the portion of the body presented and to show the essential details should be reproduced. The author will do well to indicate on the print the portions to be included in the reproduction.

#### BEN DAY PROCESS

The Ben Day process—named after the inventor, Benjamin Day—is a process for producing a variety of shaded tints by the use of gelatin films, and is used particularly in connection with zinc line engravings. Unfortunately it must be applied by the photoengraver who must be furnished with complete directions and “guide” sketches. A much simpler method consists of a transparent film on which has been printed a pattern of black dots or lines which is to be attached by rubbing to the area to be shaded and the surplus cut away with a sharp needle. For shading over black areas, white dots or lines, etc., are supplied. This can be done by any artist directly under the author’s supervision without the costly investment in the machinery needed for the Ben Day process.

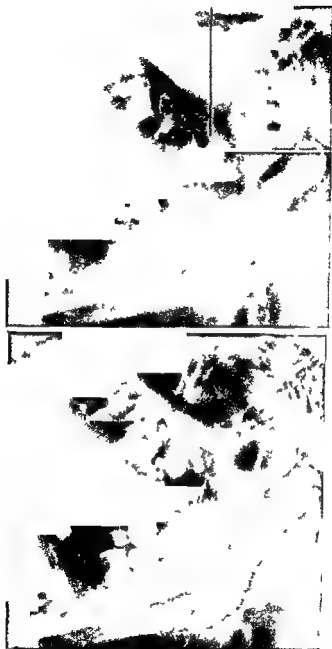


FIG. 26 The intersection of two lines (*top*) which end some little distance from the point of interest is preferred to a single arrow (*bottom*). The point of intersection leaves no doubt as to the author's meaning while the arrow if placed closely enough may make too great a contrast and thus obscure delicate shadows in the roentgenogram (Courtesy, Miller Oral Diagnosis and Treatment Philadelphia: The Blakiston Company)

## COLORED ILLUSTRATIONS

The reproduction of illustrations in color is expensive, in a periodical of the circulation and page size of *The Journal of the American Medical Association* the cost is prohibitive. It is suggested, therefore, that if possible some means other than the color process be devised to depict what it is desired to show. In drawings, for instance, it is possible to use varieties of cross hatching and stippling to differentiate the various portions, the significance of these various forms may be explained in the legend to appear under the illustration. Here again the Ben Day process or shading film may be used (see figure 11), making possible a less expensive type of reproduction.

The American Medical Association Press has adopted the following rules relative to the reproduction of illustrations in color. If the editors believe that an illustration should be reproduced in color, the Association Press will pay part of the expense, the rest to be borne by the author or by the institution with which he is connected. If it appears that an illustration will be as satisfactory if reproduced in black and white, all the expense must be borne by the author if he desires to have it reproduced in color.

The printing of colored inserts for the author's reprints is also expensive and this cost of course must be met entirely by the author.

## RETURN OF ILLUSTRATIONS

If the author wishes his illustrations returned, the word "Return," together with his address, should be written on the label on each picture, and in submitting his manuscript the author should specifically request the return of the illustrations after publication. It is necessary that illustrations be held by the publisher until the article is in pages, so that they may be properly identified by the proofreaders.

## GENERAL RULES PERTAINING TO ILLUSTRATIONS

- 1 Illustrations must illustrate

- 2 Illustrations should be correctly numbered and identified. On the mounting of each the author should indicate the top and give his name and the number of the illustration. This is done preferably by means of a paper label pasted on. On request the American Medical



Association will provide labels in quantities of 12 or less for manuscripts to be submitted for its publications

3 Illustrations should be sent flat—never rolled or folded

4 Indication should be made in the margin of the manuscript at the place where the author would like to have each illustration inserted

5 Expense can be saved by grouping illustrations when this is feasible: Such groups should be published as text figures, not as plates, and the individual sections should be lettered instead of numbered

6 Lettering on illustrations should appear, preferably, within the borders of the picture

7 Because the cost of reproducing illustrations is such an important item, the *American Medical Association Press* has adopted the policy of requesting authors to assume part or all of the expense of publishing illustrations in color as well as the cost of reproducing what it considers more than a reasonable number of black and white illustrations. The cost of reproducing illustrations in society transactions must be borne by the author or by the society

### CONCLUSIONS

Suitable illustrations attract the interest of a reader, and, if well selected and properly reproduced, are likely to cause more readers to familiarize themselves with the contents of an article than would otherwise notice it. Obviously, the eye is caught by the picture even before the reader's attention is attracted by the title or by the text. Moreover, illustrations can constitute actual scientific evidence. Their preparation should be given meticulous attention. In this connection, the following paragraph from the preface of S. Ramón y Cajal's "*Histologie du système nerveux de l'homme et des vertébrés*"<sup>1</sup> is interesting.

Illustrations, some in black and white and others in color, clarify the text of this volume, their number is considerable. There are never enough illustrations, especially in works on anatomy, in which, it might be said, the illus-

<sup>1</sup> Ramón y Cajal, S. *Histologie du système nerveux de l'homme et des vertébrés*. Paris: A. Maloine, 1907.

trations are more necessary than the text—on one condition, it is true, that they are, like ours, copied with the most scrupulous attention to detail from irreproachable preparations. Such illustrations are nature itself, the facts themselves, to be submitted to examination and free interpretation by a host of observers. They are likewise documents of infinite value to which future generations can have recourse in the continuous struggle of opinions and theories. The text itself represents the author—that is, one of many ways of looking at nature and facts—with his unavoidable tendency to twist and simplify according to the ineradicable conditions of his mental processes.

of both the author and the reader to have the table prepared so that it may stand upright, rarely does an editor arrange for the insertion of a broadside table—one on its side. When statistical data cannot be presented in any other manner, it is possible to make exceedingly large tables, which are folded and inserted in the periodical after the forms are assembled. This, however, is a costly hand process, and it is customary for periodicals to ask authors to bear the extra expense entailed. In special instances arrangements are made to spread a table across two facing pages, thus avoiding duplication of material. This likewise is not generally desirable, as it involves difficulty in arranging the article in consecutive order in the pages.

As in the case of illustrations or, in fact, of any material that has previously been published, written permission must be secured from the author or publisher if a table is reproduced from some other periodical. The table should be reproduced as nearly in the form of the original as typographic facilities permit, and the fact that it is taken from another source may be indicated as follows:

TABLE 1 (from Jones<sup>6</sup>)—*Weights of School Children*

### CHARTS

Lines in charts should be differentiated by their composition rather than by the use of different colors. They may be heavy or light, continuous or broken (composed of long or short dashes, of dots, of dots and dashes, or of dots, circles and dashes) (See figure 27.) A scatter graph may also be used.

Much of the paper sold for charting purposes has blue, green, brown or light red cross rulings, which ordinarily are not of the same intensity and which in reproduction give a spotted and broken appearance. Usually only every fifth or tenth line is required as a coordinate in locating the points that determine the path of the curve, hence chart paper without the intermediate lines—that is, with large squares—or chart paper in which the intermediate lines are light blue and can be dropped in reproduction is preferable. The American Medical Association has prepared chart paper ruled in black, with squares of three sizes, which is supplied to authors at cost.

Charts should be condensed as much as possible to permit reproduction with the least possible reduction. Waste space is avoided by bringing the borders down or up close to the curves at all points and

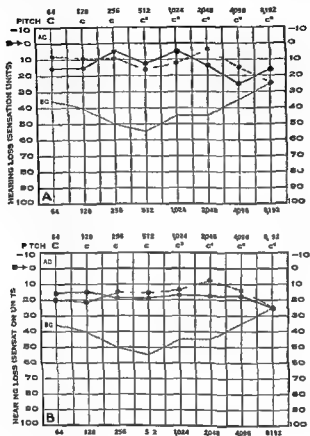


FIG. 27 These audiograms (A taken before and B after the administration of procaine hydrochloride) illustrate the use of different kinds of lines. The two lines emphasized with dots show the record for the patient—the solid line that for the right ear and the broken line that for the left. The broken line below shows the audiometer readings for a person with normal hearing.

by eliminating from the surface of the chart unimportant or irrelevant data. If a temperature curve ranges from 97° to 104° F, it is unnecessary to reproduce the whole of a temperature chart made to show variations from 95° to 107° F. The temperature chart ordinarily used



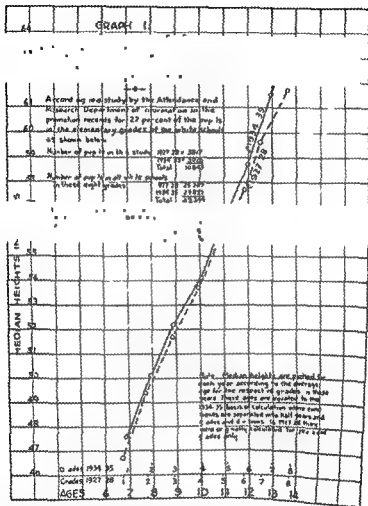


FIG. 29 The chart shown in figure 28 as improved by the use of paper with simple, large squares. It might be improved further by elimination of some of the statistical data, which could be included in the legend, in the text or as a table.

for the hospital record does not reproduce as satisfactorily as the chart prepared particularly to show the temperature, with the varying degrees indicated by printed letters on the left hand margin. Unless neatly printed, words and sentences placed on the face of the chart spoil its appearance, therefore, it usually is better to place letters, numerals, asterisks or other indicating devices on the face of the chart and to explain them in the legend. All letters, numbers and symbols on charts should be sufficiently large to permit of necessary reduction.

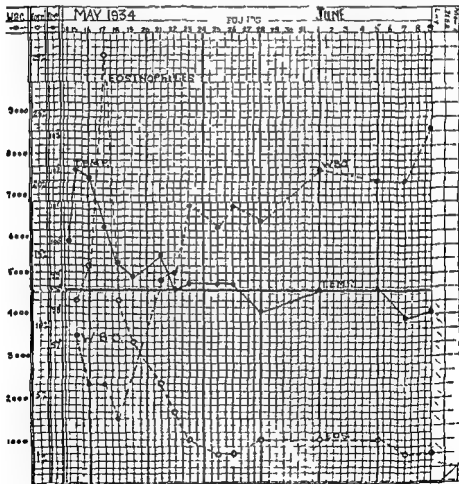


FIG. 30. Broken lines in the background give this chart a spotted and unattractive appearance, crooked and illegible letters and crowded and indistinct figures prevent it from conveying the author's information to the reader.

to accommodate the chart to the type column. Frequently papers are accompanied by charts so large that they require well over 50 per cent reduction, but the numbers and letters thereon will not permit of more than 5 per cent reduction. Such charts must be returned to the author to be redrawn which may occasion delay in publication.

Figures 28 and 30 show amateurish charts received for publication and figures 29 and 31 show the same charts after the editor had them redrawn for the author.

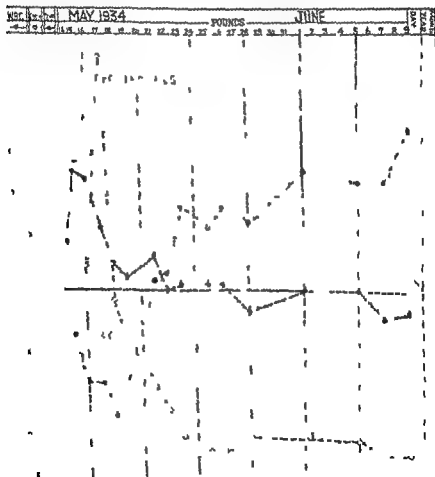


FIG. 31. Clean, well-printed chart paper, careful lettering and enlarged figures have improved the chart shown in figure 30.



The same rules apply in the presentation of statistical data by the use of various shadings. Shading should be done in black and white rather than in colors. For the purpose of contrast, solid black squares may be placed next to white squares or next to squares filled with dots, with oblique lines or with circles. It is the rule of practically all

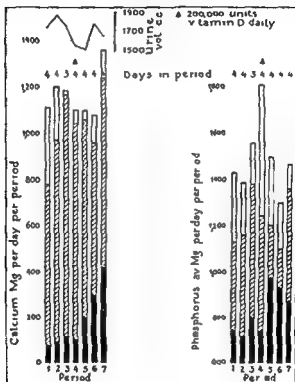


FIG. 32 This chart illustrates the use of different kinds of shading

periodicals that the author shall be asked to bear the extra expense of reproducing in color charts in which the data could be presented as well in black and white.

#### REPRINTS

Reprints are considered the property of the author and only a sufficient number is struck off by the press of the American Medical

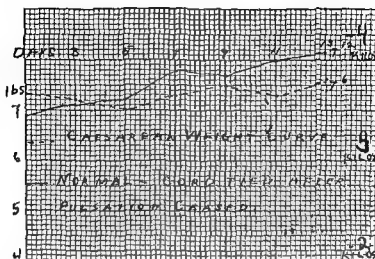


FIG. 33 The chart paper on which this chart was made was ruled in green. Such paper is pleasing to the eye in the original but gives an uneven and smudgy effect in the black and white reproduction. The excessive amounts of background and of wording moreover, distract attention from the curves themselves.

Association at the time of publication to fill the orders placed by him. Requests for reprints, therefore, should be sent directly to the author, whose address usually appears in one of the footnotes at the bottom of the first page or at the end of the article.

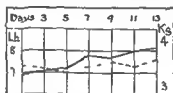


FIG. 34 The chart shown in figure 33 redrawn on chart paper ruled in black with larger squares. It occupies less space than the original, is more pleasing to the eye and is easier to read. The explanations of the lines would appear in the legend.

## Revision of the Manuscript

In his well written, interesting and practical book entitled "Notes on the Composition of Scientific Papers," Sir T. Clifford Allbutt<sup>1</sup> said that it was his custom to make at least four drafts of a manuscript before it could be considered ready for the printer. The first draft was compiled from notes that had been carefully collected on slips and arranged in logical order. Redundant words, phrases, sentences and paragraphs were then deleted, resulting in the shortening of the manuscript from 20 to 25 per cent, and sentences out of position or coherence or logical development of thought were moved to better positions. Naturally, also, second thoughts (in many instances better than first thoughts) were inserted as they occurred.

In the next revision, sentences and paragraphs were recast so as to carry but one meaning; ornamental and figurative passages were modified or removed, and particular attention was given to the choice of exact words for the meanings to be conveyed. After a few weeks had elapsed, Sir Clifford again read the entire manuscript with refreshed attention, making final additions and revisions.

Consider now how the average manuscript is written. The physician surrounds himself with textbooks, reprints, periodicals and penciled notes and starts to write his paper—probably in longhand. After more or less worry and possibly some sleepless nights, he breathes a sigh of relief, thanks heaven that it is finished and has it typewritten. He may read the typewritten copy and make one or two corrections before sending it to a medical journal, more likely, he reads the paper before a society and then, without any revision worthy of the name, sends it for publication. Not a few manuscripts offered for publication bear evidence that the only reading given them was that of the typist and that she did not correct her own misspelling. "To have a manuscript typewritten," said an editorial writer in the *British Medical*

<sup>1</sup> Allbutt, T. Clifford. *Notes on the Composition of Scientific Papers*, ed. 3. London: Macmillan & Co., 1923.

*Journal*, "and then to send it for publication without revision is a crime comparable to operating with unwashed hands"

Many physicians have envied Sir William Osler his easy command of English in his writing. In his library is a collection of some of his manuscripts, showing the various stages in their preparation. First are notes on paper of various kinds, evidently written on trains and at opportune moments, then a rough outline in longhand, next the first typewritten copy, with interlineations, transpositions and deletions, then the second typewritten copy, which also bears evidence of much modification, and, finally, a third typewritten copy, which evidently was used by the printer. Even this last copy has a few minor corrections.

Anatole France, Nobel prize winner in literature, said that seven revisions are necessary, and that an eighth is desirable in order to make sure that the corrections on the seventh have been understood. "In the first," it has been said, "he enlivened what had been platitudinous. The second was for 'weeding out the dandelions,' whos, whiches and whoms. In the third, he eliminated the semicolons, shortened his sentences and struck out phrases which merely linked one sentence with another or marked a transition from one thought to another, a task that should not be left to the reader. In the fourth draft he gave special attention to the order of sentences and to the repetition of the same word, he looked on the recurrence as a warning to rewrite the sentence, not to search for a synonym. The fifth draft saw the disappearance of adjectives for he was of the opinion of Voltaire that though the adjective might agree with the substantive in gender, number and case, often it did not suit it. From the sixth draft he chipped away what he called the pastry, all that was adventitious and redundant, and over the seventh draft he passed the plane, for, he said, 'a good writer is like a good cabinet maker—he planes his phrases smooth'."

Trelease and Yule,<sup>2</sup> in their practical book entitled "Preparation of Scientific and Technical Papers," suggest 10 revising processes, pointing out, however, that it is necessary to recopy the pages only after they have become crowded with corrections. Their first revision

<sup>2</sup> Trelease S. F. and Yule E. S. *Preparation of Scientific and Technical Papers* ed. 3 Baltimore: The Williams & Wilkins Co. 1937

is for consistency, involving the removal of irrelevant material and the avoidance of contradictions: Next, the structure of individual sentences is improved and it is emphasized that few sentences should have more than 30 words. The punctuation should be simple. Revisions are then made for clearness of sentences and paragraphs to avoid repetition, to justify the use of conjunctions, interjections and relative pronouns to make certain that the article reads smoothly, to correct punctuation to make the use of capitals and italics and the subheadings consistent, and, last, to make certain that statements are accurate.

An article appearing in a state medical journal apparently was published without revision, it presented most of the faults mentioned in this book, as well as many of those referred to in elementary books on grammar and rhetoric. The entire essay comprised 2,800 words. It was divided into 12 paragraphs, and contained only 33 sentences—an average of 84 words to a sentence. One paragraph, consisting of a single sentence of 208 words, read

We know of course that a few of the state societies have recently taken it upon themselves to initiate a campaign intended to counteract in some measure the ravages of quackery and such an effort is a very praiseworthy one and we bespeak for it a considerable degree of success, and it behooves us as members of the societies to assist in every possible manner the furtherance of this effort and also seek to enlist the aid of those of the profession who are not yet members of our societies that a united front may be presented in the fight as this is essential to the success of the campaign and we must realize further that such a united effort does not at all excuse an individual effort but rather makes this more obligatory and should remember also that in this as in all other campaigns of any character that we will get only as much out of it as we put into it so there must be no shirking of our obvious duty in this regard.

The first step in revision included the bracketing of unnecessary words and the breaking up of the long sentences into several short ones. The revised paragraph is shown in figure 35.

When the paragraph was copied, after revision, it appeared as follows

A few of the state societies have recently initiated campaigns to counteract the ravages of quackery. Such an effort is praiseworthy, and it behooves members of the societies to assist in every possible manner. They should also seek to enlist the aid of physicians who are not yet members of the societies.

[We know, of course, that] a few of  
 the state societies have recently [taken  
 it upon themselves to] initiate ~~a~~<sup>the</sup> campaign  
 [intended] to counteract [in some measure] the  
 ravages of quackery [and] such an effort is  
 [a very] praiseworthy, [one and we bespeak for  
 it a considerable degree of success,] and  
 it behooves [us as] members of the societies  
 to assist in every possible manner [the  
 furtherance of this effort, and] <sup>They should</sup> also seek  
 to enlist the aid of <sup>physicians</sup> ~~these~~ [of the pro-  
 fession] who are not yet members of ~~our~~ <sup>the</sup>  
 societies, that a united front may be pre-  
 sented [in the fight as] this is essential to  
 the success of the campaign [and we must  
 realize further, that] such a united effort  
 does not [at all] excuse [an] individual  
 effort but [rather] makes this [more] obliga-  
 tory, [and should remember also, that] in  
 this as in all [other] campaigns [of any  
 character, that] we will get only as much  
out [of it] as we put in to it, so there must  
 be no shirking of [our] obvious duty [in this  
 regard.]

FIG. 35 The first step in revision

that a united front may be presented This is essential to the success of the campaign Such a united effort does not excuse individual effort but makes this obligatory In this as in all campaigns we will get out only as much as we put in There must be no shirking of obvious duty

With further revisions for punctuation diction and emphatic style, the paragraph appeared as in figure 36

A few ~~of the~~ state societies have recently initiated <sup>praiseworthy</sup> campaigns to counteract the ravages of quackery. ~~Such an effort is praiseworthy, and~~ it behooves ~~the~~ members ~~of the societies~~ to assist in every possible manner. They should ~~also~~ seek to enlist the aid of physicians who are not yet members, ~~of the societies~~ that a united front may be presented. This is essential to the success of the campaign. ~~Such a~~ <sup>however,</sup> united effort, <sup>it</sup> does not excuse one from individual effort but makes <sup>one</sup> this obligatory. In this, as in all campaigns, <sup>one</sup> we <sup>one puts</sup> will get out only as much as ~~we put~~ in. There must be no shirking of obvious duty.

FIG 36 The appearance of the material in figure 35 after further revision

Here, then, is the paragraph as finally revised, probably still susceptible of improvement in diction

A few state societies have recently initiated praiseworthy campaigns to counteract the ravages of quackery. It behooves the members to assist in every possible manner. They should seek to enlist the aid of physicians who are not yet members, that a united front may be presented. This is essential to the success of the campaign. United effort, however, does not excuse one from individual effort but makes it obligatory. In this, as in all campaigns, one will get out only as much as one puts in. There must be no shirking of obvious duty.

# 16

## Proofreading

Nearly all periodicals submit proof to the author prior to publication. It is then his privilege and duty to scrutinize the proof—whether in galley or page form—to make certain that the printed article which will appear under his name is entirely to his satisfaction. When an article has been prepared by more than one author, proof will be sent to the one whose name appears first, in the absence of written directions to the contrary. On special request, proof may be sent to each of the several authors.

### CORRECTIONS

Reading proof will be facilitated if the following rules are observed

1. Read the proof against the manuscript, checking carefully for omissions, errors in spelling and fact and other deviations from copy.
2. Never erase or alter any proofreader's marks made on proof.
3. Answer all queries written on proof. Queries are made in the interest of accuracy, and not in a spirit of criticism. (Sometimes they are set in large type, called 'catchlines' intended to catch the author's attention.) Cross out the question mark or draw a line through the catchline and correct the questioned portion if it is wrong. It is unsatisfactory merely to write O.K. in the margin, for this may not answer the question, leaving the proofreader in doubt as to whether the original text or the suggested change is O.K.
4. Make all corrections legibly in the margin of the proof—never inside the type page or on the manuscript. Do not draw lines from the point at which corrections are to be made into the margin of the proof, for they create confusion (see page 186), instead mark your corrections in the margin parallel to the line of type in which the correction is to appear.



# Signs Used in Correcting Proof

## PARAGRAPHING

*H* Make a new paragraph  
*no H, or run on* No paragraph

## INSERTION AND DELETION

*the* Insert word, letter or punctuation written in the margin  
*Out, see copy* Insert matter omitted  
*^* indicates where insertion is to be made  
*S* Delete, or take out, a line or word

## SPACING

*#* Insert space between words, letters or lines  
*∩* Close up, or take out space  
*⊗* Take out letter and close up  
*⊕* Close up, but leave some space  
*Center* Put in middle of page or line

## POSITION

*⊙* Turn to proper position.  
*⌊* Move to left  
*⌋* Move to right  
*⌋* Move down a letter character or word  
*⌈* Move up a letter, character or word  
*□* Indent one em  
*⌐* Straighten a crooked line  
*||* Straighten lateral margin of printing  
*tr* Transpose order words or letters  
*tr #* Transpose space  
*✓✓* Correct uneven spacing  
*space out* Spread words farther apart  
*run over* Run over to next line (A two letter vision is not allowed)  
*run back* Run back to preceding line (Such a vision is not allowed)

# Signs Used in Correcting Proof

## PUNCTUATION

○	Period
↗	Comma
↘	Apostrophe
	Colon
;	Semicolon
“ ”	Quotation marks
—	Hyphen (-)
—	En dash (-)
<sup>1</sup> / <sub>em</sub> —	Em dash (—)
<sup>2</sup> / <sub>em</sub> —	Two em dash (—)
=	Sign of equality (=)
(/)	Parentheses
[/]	Brackets

## MISCELLANEOUS

↓	Push down a space that prints
Ⓟ	Question to author Is this right?
stet	Allow to <del>stand</del> as it is
lc	<u>RESFD</u> in lower case
caps	<u>Reset</u> in capitals
U	use a capital
small caps	Reset in small capitals
rom	Reset in roman
ital	Reset in italic
bf	Reset in bold face
wf	Wrong font (wrong size or style)
↑	Superior figure
↓	Inferior figure
X	Type is broken or imperfect
≡	under = letter or a word indicates capitals
=	SMALL CAPITALS
—	Italics
~	Bold face
≡	BOLD FACE CAPITALS
≡	BOLD FACE SMALL CAPITALS
~	Bold face italics

The following paragraph contains a number of errors. Below it the paragraph as corrected by the proofreader, and immediately following appears the paragraph after the corrections have been made.

It was of more than incidental interest to know that the galveston epidemic of last year was accompanied by a scourge of Mosquitoes of the species (*Stegomyia fasciata*, or *Aedes aegypti*) responsible for the transmission of yellow fever.

It was of more than incidental interest to know that the galveston epidemic of last year was accompanied by a scourge of Mosquitoes of the species (*Stegomyia fasciata*, or *Aedes aegypti*) responsible for the transmission of yellow fever.

It was of more than incidental interest to know that the Galveston epidemic of last year was accompanied with a scourge of mosquitoes of the species (*Stegomyia fasciata* or *Aedes aegypti*) responsible for the transmission of yellow fever.

5 Put a caret inside the type page at the point where an insertion is to go, but do not put a caret in the margin under the material to be inserted.

6 Use ink of a color different from that already used on the proof. This is to differentiate between your changes and those made by the printer.

7 Use the universally accepted proofreader's signs and symbols as illustrated on pages 184 and 185.

8 When making changes in proof, whenever possible provide space for new words by omitting the same number of letters in closely adjacent material. This will result in a considerable saving in the cost of resetting type.

9 Retype extensive changes on a full-sized sheet of paper, identify the sheet with the galley or page number and paste it firmly to the margin of the proof. Do not use clips or pins.

10 When inserting new material on proof, be sure that the new matter conforms to the style of spelling, punctuation, etc., used in the material already set.

11 Cross out all material to be eliminated.

12 Indicate in the margin where illustrations are to be inserted in the proof. (The publisher, however, reserves the right to digress from your choice if it is unsuitable because of mechanical or economic considerations.)

13 Facing pages may each be one line long or one line short, but should you be asked (a) to supply material to add a line or (b) to delete material to eliminate a line, do so carefully in order that the pages may be of the proper depth

14 Remember that, if set on the linotype machine, a change of so little as one letter or mark of punctuation in a line will necessitate the resetting of the entire line

15 Indicate on galley proof what the running head should be if the title of the article is too long to be accommodated

16 Never cut proof apart, for it represents type as standing on the printer's table. He makes corrections by following the proof, and can do so more rapidly if all the material is available

17 Mark your duplicate proof exactly like the master set

18 Return the printer's master set promptly, together with the manuscript. Meeting scheduled publication dates partially depends on your cooperation in this respect

19 Make the index from your duplicate set of proofs

The author should remember that the proof has been sent to him for *reading*, not *rewriting*. Consciousness of this fact will save him considerable expense when the cost of author's alterations is added up on publication.

# Indexing

In compiling an index, the author should remember that he is constructing a tool intended for one purpose only—to enable the reader *quickly and easily* to find the subject he is interested in. The author already knows the subject matter of his book, but too often he forgets that the reader must depend on a more or less imperfect knowledge of what to seek, therefore index entries should be couched in language understandable to the reader. For example, should the author index all entries pertaining to that subject under the words "Hansen's disease," forgetting the commonly used "leprosy," a reader who may be unfamiliar with the former term may think the subject of leprosy is not discussed.

## ORGANIZING THE MATERIAL

Usually the author will receive a duplicate set of page proofs, simultaneously with the printer's master set. Before returning the printer's set, he should incorporate every mark thereon into his own set of pages, so that he can retain an exact copy of the proof as released to the printer. He should pay particular attention to any marks indicating transposition of material from one page to another, for this will affect the subsequent pagination and, in turn, the index.

The first step in compiling an index is to check all the pages for proper numerical sequence. Then, using a colored crayon pencil (preferably red), the author should underscore those words, phrases and subjects he wishes to appear in the index. This procedure should be followed throughout the entire page proof. He need not restrict himself to underlining items in the text only, but may—and should—include center heads and side heads as well as chapter titles. Simultaneously, as he progresses through the page proof, he should note in the margin of the page any cross references that should be accommodated in the writing of the index entries. For example, if "pregnancy" is under discussion, he should write down the synonyms

"gestation" and "gravity." (Later he will choose one of these words under which to group the page references, treating the other words as cross references. See page 190.)

As a general rule, to be proportionate in length, an index should contain about three times as many entries as there are pages of text indexed—in other words, each page of text will contribute about three entries to the index. By no means is this rule of thumb to be construed as obligatory, it is offered merely as a guide to the author who is endeavoring to build a functional index which tells the story but is free of "padding."

After laying the above groundwork, the author is ready for the actual writing of the items which will comprise the index.

### WRITING THE ENTRIES

The author may write the entries in longhand, or he may type them (see page 193). In either case, work will be facilitated by using a continuous roll of paper tape such as is used in cash registers. It is of a weight conducive to easy handling and later can be cut apart into separate entries for rearrangement into alphabetical order.

Another useful device is regulation size 8½ by 11 inch paper perforated into some 10 parts. Each entry may be written or typed on one of the sections and later the whole can easily be separated into its parts.

Cards measuring 3 by 5 inches are used frequently, but since each must be inserted individually into the typewriter considerable inconvenience results.

The author should decide what is the key word in the phrase previously underscored in red—the word most likely to be sought by the reader. Usually the key word will be a noun. Generally speaking an index should be composed of noun entries—both main entries and subentries—and not of adjective entries unless (a) such adjectives possess a particular significance (as "catalytic reagents") or (b) the noun is vague (as "hereditary conditions").

**Example** Suppose on page 80 the phrase "external carotid artery" has been underlined. Since the key word is "artery" the entry should be written "artery carotid external, 80" (The inversion of the words "external carotid"

permits the later insertion of other subentries under the noun "artery" such as "internal carotid," "anterior cerebral," etc.)

If a subject can be discussed under several key words, the author should enter it under all such words, either with the page reference or with a cross reference to the item he considers most important. Examples follow

Bronchopneumonia, 87  
penicillin in, 88

Gestation (*see* Pregnancy)  
Gravidity (*see* Pregnancy)  
Pregnancy, 206-243

and also

Penicillin 102  
in bronchopneumonia, 88

Since each entry and subentry is written on a separate card or slip, it follows that full information must be given for each one as they are not in any order when being written. For example, since the entry "muscles" may prove to have more than one subentry, the identifying word "muscles" must appear on every subentry even though it will be eliminated in the final editing (see page 193).

Likewise in indexing, the use of verbs and phrases should be avoided in favor of nouns. Examples follow

*Avoid* Streptomycin, administering, 102  
*Avoid* Streptomycin, how to administer, 102  
*Use* Streptomycin, administration of, 102

*Avoid* Antibiotics and their use in combating infection, 76-110  
*Use* Antibiotics use of to combat infection, 76-110

When writing the entries, the indexer should try to maintain a uniform style throughout, for an ounce of care in this respect will save a pound of work in the final over-all editing of the completed index manuscript. He should write inclusive page folios or numbers in full, e.g., 358-362 (not 358-62), 26-28 (not 26-8). He should also write all entries exactly as they appear in the pages of text, paying particular attention to hyphenation and the spelling of proper names and foreign words.

#### REFERENCES TO ILLUSTRATIONS

Index references to illustrations may be differentiated from those pertaining to the text proper by underscoring the page number or

folio (These underscored folios then may be set in either italics or boldface, according to the preference of the publisher) If this plan is adopted, a line should appear on page 1 of the index to the effect that "Page numbers set in *italics* [or **boldface**] refer to illustrations thereon" Examples follow

Morbidity, 78, 103

Morbidity, 78, 103

#### REFERENCES TO FOOTNOTES AND TABLES

Index references to footnotes or tables may be expressed by using a lower case n (for footnote) or t (for table) closed up to the page folio Examples follow

Stomatitis, 38n, 42

Strabismus, 13, 26t

#### CROSS REFERENCES

For easy readability, the following style is suggested for simple cross references where no folio is linked to the entry

Fever, 38

childbed (*see* Fever puerperal)

puerperal 42

Oxytocin (*see* Pitocin)

When an entry pertains not only to a page in the book, but also to another entry, the following style is suggested

Riboflavin, 262 (*see also* Vitamin B<sub>2</sub>)

#### ALPHABETIZING THE ENTRIES

The first step in alphabetizing is to arrange the entries into 26 groups—one for each letter of the alphabet Then, taking the letter A, and later proceeding in like manner with the other letters of the alphabet, the author should arrange the many main entries, sub-entries and sub-subentries into alphabetical order, for the time being disregarding an apparent repetition of many of the key words (This situation will be remedied in the final editing—see page 193)

Words which are stems in themselves should precede words con-



taining that stem (e g, "milk" and all its subentries should precede "milking" even though the subentries of "milk" start with a letter in the alphabet succeeding "i").

Milk sugar, 56

Milking, 58

Single word entries should precede compound word entries containing the same word, as follows

Milk, testing, 56

Milk proteins, 108

Following is an example combining the above illustrations

Milk testing, 56

turbidity, 54

Milk proteins, 108

Milk sugar, 76

Milking, 58

Milky Way, 98

With the exception of combining forms, hyphenated words and proper names should be treated as separate words, as follows

Brown, Xavier, 22

Brown-Williams Henry, 84

Browne, F T, 100

Cardioneurosis, 95

Cardio-omentopexy, 71

Cardiopath, defined, 53

} combining forms treated as one word

Gram-molecule, 89

Grammole, defined, 65

When alphabetizing eponymic entries, the 's in the possessive case should be ignored, as follows

Dalton, Peter, 23

Dalton's law, 10

Dalton phenomenon, 82

## EDITING THE ENTRIES

After arranging the various items in alphabetical order and numbering them in sequence, the author should read the entire index

to see that a consistent style of capitalization and punctuation has been used

At this time, as illustrated below, he should cross out the superfluous information necessarily included when the various entries were being written. Simultaneously with this crossing out of excess material he should also indicate the proper indentation of the various subentries and sub-subentries. One way is to use the conventional em marks as follows

Muscle(s), 66, 67  
~~Muscle(s), abductant~~  
 (see Muscle, rectus lateralis)  
~~Muscle(s)~~  
 □ abnormal movements, 36  
~~Muscle(s)~~  
 [2] atrophy of, electrical tests in, 37  
~~Muscle(s), fascic~~  
 [3] fasciculations in myasthenia gravis, 91

Multiple sclerosis (or Sclerosis multiple)  
 Muscle(s) 66, 67  
 [1] abductor (or Muscle rectus lateralis)  
 abnormal movements of 36  
 adductor pollicis testing of 39  
 axis of (or Axis of muscles)  
 atrophy of 36  
 [2] electrical tests in 37  
 n acute sneer or pol myelitis 111  
 secondary 87  
 [3] to electrical tests in [ ]  
 [4] c at 147  
 [5] contractures of 24  
 paralysis of in lesions of seventh cranial nerve 147  
 n in vaichen a grav s 91  
 n nuclear test 2 23  
 n polymyositis 147  
 [6] for *removers*

Another way is to employ a series of colored crayon pencil strokes before each entry, one stroke indicating "set flush," two strokes indicating "set one em indent," three strokes indicating "set two ems indent," etc. Lines that run over to a second line (called runovers, overruns or turnovers) should be marked to be indented one em more than the most subordinate entry

Muscle(s) 66, 67  
~~Muscle(s) abductant~~  
 (see Muscle rectus lateralis)  
~~Muscle(s)~~  
 || abnormal movements, 36  
~~Muscle(s)~~  
 ||| atrophy of, electrical tests in 37  
~~Muscle(s), fascic~~  
 ||| fasciculations in myasthenia gravis, 91

Multiple sclerosis (or Sclerosis multiple)  
 Muscle(s) 66, 67  
 || abductor (or Muscle rectus lateralis)  
 abnormal movements of 36  
 adductor pollicis testing of 39  
 axis of (or Axis of muscles)  
 atrophy of 36  
 || electrical tests in 37  
 || n acute sneer or pol myelitis 111  
 secondary 87  
 ||| to electrical tests in [ ]  
 ||| c at 147  
 ||| contractures of 24  
 ||| paralysis of in lesions of seventh cranial nerve 147  
 ||| n in vaichen a grav s 91  
 ||| n nuclear test 2 23  
 ||| n polymyositis 147  
 ||| *removers*

In both illustrations, representative examples are shown written in longhand, together with their accompanying counterparts as typed (Obviously these illustrative index samples are the product of the typesetting machine, but the principle remains the same ) Which-ever plan is followed, it should be done carefully

Should there be too few proper names to make a separate "Index of Authors," such names may be incorporated in the "Subject Index" but marked to be set in capitals and small capitals to distinguish them from the subject entries To avoid confusion, all proper names should bear identifying initials or the Christian name if available For example, "Smith, 452" in an index containing references to other people named Smith would prove of little value to the reader "Smith, Henry, 452" or "Smith, R W , 87 ' is preferable

In the final editing, the indexer should consolidate on one slip or card, in logical numerical sequence, all entries pertaining to the same key word For example, if the subject "acromegaly" is discussed in three places in the book (on pages 12, 34 and 56-62, say), in alphabetizing the indexer will have filed these three separate cards in numerical order These separate entries should now be converted into one card to send to the printer The result will read "Acromegaly, 12, 34, 56-62 '

On the other hand, if two or more entries are composed of compound names containing the same preceding modifiers, the compound name should be considered as the main entry and repeated in full Examples follow

Absolute alcohol 240  
 Absolute ether 309  
 Aniline 34  
     chart of reactions, 36  
     salts of 38  
 Aniline black, 40  
 Aniline blue, 41

Finally the indexer should check all cross references to eliminate those so-called "dead-end" or "runaround" items that chase the reader fruitlessly from one to another to no purpose Examples follow

Plessimeter (*see* Pleximeter)  
 Pleximeter (*see* Plessimeter)

**TYPING THE INDEX**

After completing the editing of the index, the cards or slips may be submitted for printing or they may be typed in sequence on regular size 8½ by 11 inch paper, thus reducing the over-all bulk of the index manuscript. Since errors may creep in during the new typing the new manuscript must again be read critically, comparing it with the original cards.

The typing should be double spaced and the indentions of the various subentries kept uniform.

In both illustrations, representative examples are shown written in longhand, together with their accompanying counterparts as typed (Obviously these illustrative index samples are the product of the typesetting machine, but the principle remains the same ) Which-ever plan is followed, it should be done carefully

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     salts of 38  
 Aniline black, 40  
 Aniline blue, 41

Finally the indexer should check all cross references to eliminate those so-called "dead-end" or "runaround" items that chase the reader fruitlessly from one to another to no purpose Examples follow

Plessimeter (*see* Pleximeter)  
 Pleximeter (*see* Plessimeter)

- Acta med orient**—*Acta medica orientalia* The Palestine and Near East Medical Journal  
P O B 3011, Tel Aviv, Palestine
- Acta med Scandinav**—*Acta medica Scandinavica* Stockholm
- Acta med URSS**—*Acta medica URSS* Rakhmanovskiy per , 3 Moskva
- Acta obst.et gynec Scandinav**—*Acta obstetricia et gynecologica Scandinavica* Prof  
E Ahlstrom, Karolinska sjukhuset Stockholm 60
- Acta ophth**—*Acta ophthalmologica* Ejnar Munksgaard Nørregade 6 København
- Acta orthop Scandinav**—*Acta orthopaedica Scandinavica* Ejnar Munksgaard, Nørre-  
gade 6 København
- Acta oto-laryng**—*Acta oto-laryngologica* Hospital Sabbatsberg Stockholm
- Acta oto-rhino-laryng belg**—*Acta oto-rhino-laryngologica belgica* Dr P Hennebert  
rue Mercelis 86 Bruxelles (Continuation of Bull Soc. belge d'otol., rhinol.,  
laryng )
- Acta paediat.**—*Acta paediatrica* Prof I Jundell Ed 23 Artillerigatan, Stockholm
- Acta paediat belg**—*Acta paediatrica belgica* 64 rue de la Concorde Bruxelles
- Acta path et microbiol Scandinav**—*Acta pathologica et microbiologica Scandinavica*  
Ejnar Munksgaard Nørregade 6 København
- Acta pharmacol et toxicol**—*Acta pharmacologica et toxicologica* Ejnar Munksgaard  
Nørregade 6 Copenhagen
- Acta physiol Scandinav**—*Acta physiologica Scandinavica* P A Norstedt & Söner  
Tryckergatan 2 Stockholm 2
- Acta psychiat. et neurol**—*Acta psychiatrica et neurologica* Dr Knud H Krabbe  
Dronningens Tværgade 6 København
- Acta radiol**—*Acta radiologica* P A Norstedt & Söner Stockholm
- Acta trop**—*Acta tropica* Zeitschrift für Tropenwissenschaften und Tropenmedizin Prof  
Dr R. Geigy Stapfelberg 7 Basel
- Acta tuberc Scandinav**—*Acta tuberculosea Scandinavica* Ejnar Munksgaard Nørre-  
gade 6 København
- Acta urol**—*Acta urologica* Üllői út 78/b X Kapu Budapest 8
- Actas dermo-sif**—*Actas dermo-sifilográficas* Alcalá 117 Madrid
- Actas Soc de cir de Madrid**—*Actas de la Sociedad de cirugía de Madrid* Avenida de  
Jose Antonio 34 Madrid
- Actual med peruana**—*Actualidad médica peruana* Casilla de Correo No 536 Lima
- Arztl Monatshft**—*Ärztliche Monatshefte für berufliche Fortbildung* Cahiers mensuels  
de médecine GBS Verlag Gerber Buchdruck Schwarzenburg Bern
- Alcohol Hyg**—*Alcohol Hygiene* 2030 Park Ave Baltimore 17 Md
- Alergia**—*Alergia* Anchorena 1338 Dpto B Buenos Aires
- Am Heart J**—*American Heart Journal* C V Mosby Co 3207 Washington Blvd St  
Louis 3
- Am J Anat**—*American Journal of Anatomy* Wistar Institute 36th St and Woodland  
Ave Philadelphia 4
- Am J Clin Path**—*American Journal of Clinical Pathology* [including] Technical Section  
Williams & Wilkins Co Mt Royal and Guilford Aves Baltimore 2
- Am J Digest Dis**—*The American Journal of Digestive Diseases* Sandfield Publishing Co  
435 Lincoln Bank Tower Fort Wayne Indiana (Continuation of Am J Digest  
Dis & Nutrition )
- Am J Dis Child**—*American Journal of Diseases of Children* American Medical Associa-  
tion 535 N Dearborn St Chicago 10
- Am J Hyg**—*American Journal of Hygiene* 615 N Wolfe St Baltimore 5

**Am J Hyg**, Monographic Series —(Listed under Books)

**Am J M Sc**—American Journal of the Medical Sciences Lea & Febiger, 600 E Washing-  
ton Sq, Philadelphia 3

**Am J M Technol**—The American Journal of Medical Technology Medical Center  
Bldg, Lafayette, La (Continuation of Am Soc. Clin Lab Techn and of Bull  
Am Soc Clin Lab Techn)

**Am J Med**—The American Journal of Medicine Yorke Publishing Co Inc 49 W  
45th St New York 19

**Am J Ment Deficiency**—American Journal of Mental Deficiency 372 374 Broadway  
Albany N Y (Continuation of Proc Am A Ment Deficiency)

**Am J Nursing**—American Journal of Nursing 1790 Broadway New York 19

**Am J Obst & Gynec**—American Journal of Obstetrics and Gynecology C V Mosby  
Co 3207 Washington Blvd St Louis 3

**Am J Occup Therapy**—The American Journal of Occupational Therapy American  
Occupational Therapy Assoc AJOT Publishing Co 739 Boylston St Boston 16

**Am J Ophth**—American Journal of Ophthalmology Ophthalmic Publishing Co 837  
Carew Tower Cincinnati

**Am J Orthodontics**—American Journal of Orthodontics and Oral Surgery C V Mosby  
Co 3207 Washington Blvd St Louis 3 (Continuation of Internat J Ortho-  
dontia)

**Am J Orthopsychiat**—American Journal of Orthopsychiatry 25 W 54th St New York  
19

**Am J Path**—American Journal of Pathology Dr C V Weller East University Ave  
Ann Arbor Michigan

**Am J Pharm**—The American Journal of Pharmacy and the Sciences Supporting Public  
Health Philadelphia College of Pharmacy and Science 43d St Kingessing and  
Woodland Aves Philadelphia 4

**Am J Phys Anthropol**—American Journal of Physical Anthropology Wistar Institute  
36th St and Woodland Ave Philadelphia 4

**Am J Physiol**—American Journal of Physiology American Physiological Society  
Managing Editor Dr D R Hooker 19 W Chase St Baltimore 1

**Am J Psychiat**—The American Journal of Psychiatry The American Psychiatric  
Association 9 Rockefeller Plaza New York 20

**Am J Psychol**—The American Journal of Psychology Morrill Hall Cornell University  
Ithaca N Y

**Am J Psychotherapy**—American Journal of Psychotherapy 16 West 77th St New York  
24

**Am J Pub Health**—American Journal of Public Health and the Nation's Health 1790  
Broadway, New York 19

**Am J Roentgenol**—American Journal of Roentgenology and Radium Therapy Charles  
C Thomas 301 327 E Lawrence Ave Springfield Ill

**Am J Surg**—American Journal of Surgery 49 W 45th St New York 19

**Am J Syph, Genor & Ven Dis**—American Journal of Syphilis Gonorrhea and Venereal  
Diseases C V Mosby Co 3207 Washington Blvd, St Louis 3

**Am J Trop Med**—American Journal of Tropical Medicine Williams & Wilkins Co,  
Mt Royal and Guilford Aves, Baltimore 2

**Am J Vet. Research**—American Journal of Veterinary Research American Veterinary  
Medical Association 600 S Michigan Ave, Chicago

**Am Pract**—American Practitioner 227-231 S Sixth St Philadelphia 5

- Am Rev Soviet Med**—American Review of Soviet Medicine American-Soviet Medical Society, 58 Park Ave., New York 16
- Am.Rev.Tuberc**—American Review of Tuberculosis [including Spanish summaries] National Tuberculosis Association, 1790 Broadway, New York 19
- Amatus**—Amatus Lusitanus Revista de medicina e cirurgia Lavraria Portugal, Rua do Carmo, 70, Lisboa
- An argent de oftal**—Anales argentinos de oftalmología Órgano oficial de la Cátedra de oftalmología (Fac. de medicina de Rosario) y de la Sociedad de oftalmología del litoral Hospital Centenario, Sala 10 Rosario
- An brasil de dermat e sif**—Anais brasileiros de dermatologia e sifilografia Caixa Postal 382, Rio de Janeiro
- An brasil de gynec**—Anais brasileiros de gynecologia Caixa Postal 1282, Rio de Janeiro (Continuation of Ann brasil de gynec)
- An Casa de salud Valdecilla**—Anales de la Casa de salud Valdecilla Instituto médico de postgraduados Apartado 282, Santander España
- An de cir**—Anales de cirugía Calle Paraguay 40, Rosario, Argentina
- An Dupen púb nac para enferm d ap digest**—Anales del Dispensario público nacional para enfermedades del aparato digestivo Aniceto Lopez Junín 845, Buenos Aires
- An Fac med, Lima**—Anales de la Facultad de medicina Cailla 529, Lima
- An Fac de med de Montevideo**—Anales de la Facultad de medicina de Montevideo Facultad de medicina, Avenida General Flores, 2125, Montevideo
- An Fac de med de Pôrto Alegre**—Anais da Faculdade de medicina de Pôrto Alegre Caixa Postal No 657, Pôrto Alegre, Rio Grande do Sul Brasil
- An Fac de med da Univ de São Paulo**—Anais da Faculdade de medicina da Universidade de São Paulo, Caixa Postal 100 B, São Paulo (Continuation of Ann Fac de med da Univ de São Paulo)
- An méd, México**—Analecta médica Órgano oficial de la Sociedad médica del Sanatorio español Boulevard Miguel de Cervantes Saavedra Méxuo D F
- An paulist de med e cir**—Anais paulistas de medicina e cirurgia Caixa Postal, 1574 São Paulo (Continuation of Ann paulist de med e cir)
- An Soc biol Bogotá**—Anales de la Sociedad de biología de Bogotá Calle 24, No 7-42 Bogotá
- An Soc méd-quir d Guayas**—Anales de la Sociedad medico-quirurgica del Guayas Apartado de Correo 1134, Guayaquil, Ecuador
- An Soc mex de oftal y oto-rino-laring**—Anales de la Sociedad mexicana de oftalmología y oto-rino-laringología Escuela nacional de medicina esq Brasil y Venezuela, Méxuo, D F
- An Soc puericult Buenos Aires** See Rev Soc puericult Buenos Aires
- Analyst**—The Analyst W Heffer & Sons, Ltd Hills Road, Cambridge, England
- Anat Anz**—Anatomischer Anzeiger Gustav Fischer Jena
- Anat Rec**—Anatomical Record Wistar Institute, 36th St and Woodland Ave Philadelphia 4
- Anesth & Analg**—Current Researches in Anesthesia and Analgesia 318 Hotel Westlake Rocky River 16, Ohio
- Anesth et analg**—Anesthésie et analgésie Masson & Cie, 120 Boulevard Saint Germain Paris 6<sup>e</sup>
- Anesthesiology**—Anesthesiology The Journal of the American Society of Anesthesiologists, Inc Dr William G Schmidt, 235 N 15th St., Philadelphia 2
- Angle Orthodontist**—The Angle Orthodontist Edward H Angle Society of Orthodontia, 55 E. Washington St., Chicago



- Ann Allergy** —Annals of Allergy [including Spanish summaries] Official Journal of the American College of Allergists 401 La Salle Medical Bldg, Minneapolis 2
- Ann d'anat path** —Annales d'anatomie pathologique et d'anatomie normale médico-chirurgicale Masson & Cie 120 Boulevard Saint Germain Paris 6\*
- Ann Biochem & Exper Med** —Annals of Biochemistry and Experimental Medicine Indian Institute for Medical Research P27 Prinsep St Calcutta
- Ann brasil de gynec** —Continued as An brasil de gynec
- Ann chir et gynaeec Fenniae** —Annales chirurgiae et gynaeecologiae Fenniae Årjokatu 17 Helsinki
- Ann Dent** —Annals of Dentistry Dr C Fred Ga Nun Business Manager 30 Central Park South New York 19 (Continuation of J New York Acad Dent)
- Ann de dermat et syph** —Annales de dermatologie et de syphiligraphie Bulletin de la Société française de dermatologie et de syphiligraphie Masson & Cie 120 Boulevard Saint Germain Paris 6\*
- Ann d'endocrinol** —Annales d'endocrinologie Masson & Cie 120 Boulevard Saint Germain Paris 6\*
- Ann Eugenics** —Annals of Eugenics Galton Laboratory for National Eugenics Rothamsted Experimental Station Harpenden Herts England
- Ann d'hyg** —Annales d'hygiène publique industrielle et sociale J B Baillière & fils 19 rue Hauteville Paris
- Ann d'ig** —Annali d'igiene Via Antonio Salandra (già delle Finanze) 14 Roma
- Ann Inst Pasteur** —Annales de l'Institut Pasteur Masson & Cie 120 Boulevard Saint Germain Paris 6\*
- Ann Int Med** —Annals of Internal Medicine American College of Physicians Prince and Lemon Sts Lancaster Pa
- Ann Ist Carlo Forlanini** —Annali dell'Istituto Carlo Forlanini Monteverde Nuovo Roma
- Ann ital di chir** —Annali italiani di chirurgia Casella Postale 282 Bologna
- Ann laring, otol** —Annali di laringologia otologia rinologia e faringologia Prof Dott Carlo Bruzzone Ospedale Maggiore di S Giovanni Torino
- Ann méd** —Annales de médecine Masson & Cie 120 Boulevard Saint Germain Paris 6\*
- Ann med exper m biol Fenniae** —Annales medicinae experimentalis et biologiae Fenniae Årjokatu 17 Helsinki (Continuation of Acta Soc med fenn duodecim Ser A)
- Ann med int Fenniae** —Annales medicinae internae Fenniae Årjokatu 17 Helsinki
- Ann d'ocul** —Annales d'oculistique Gaston Doin & Cie 8 Place de l'Odéon Paris 6\*
- Ann Osp psichiat Perugia** —Annali dell'Ospedale psichiatrico di Perugia Presso l'Ospedale psichiatrico di Perugia Casella Postale N° 79, Perugia
- Ann ostet e gynec** —Annali di ostetricia e ginecologia Via Commenda 12 Milano
- Ann Otol, Rhin & Laryng** —Annals of Otology Rhinology and Laryngology Annals Publishing Co 7200 Wydown Blvd St Louis 5
- Ann d'oto-laryng** —Les annales d'oto-laryngologie Bulletin de la Société de laryngologie des hôpitaux de Paris Masson & Cie 120 Boulevard Saint Germain Paris 6\*
- Ann ottal e clin ocul** —Annali di ottalmologia e clinica oculistica Clinica oculistica della Università Genova
- Ann pædiat** —Annales pædiatriæ (International Review of Pediatrics) S Karger Holbeinstrasse 22 Basel (Continuation of Jahrb f Kinderh)
- Ann de parasitol** —Annales de parasitologie humaine et comparée Masson & Cie 120 Boulevard Saint Germain Paris 6\*

- Ann paulist de med e cir**—Continued as *An paulist de med e cir*
- Ann radiol diag**—*Annali di radiologia diagnostica* L. Cappelli Via Farini 6 Bologna
- Ann Rev Biochem**—*Annual Review of Biochemistry* Annual Reviews Inc Stanford University P O, Calif
- Ann Rev Physiol**—*Annual Review of Physiology* Annual Reviews Inc Stanford University P O Calif
- Ann Rheumat Dis**—*Annals of the Rheumatic Diseases* H K Lewis & Co Ltd 136 Gower St London, W C 1 (Continuation of *Rheumat Dis*)
- Ann Surg**—*Annals of Surgery* J B Lippincott Co 227-231 S 6th St Philadelphia 5
- Ann Trop Med**—*Annals of Tropical Medicine and Parasitology* University Press 177 Brownlow Hill, Liverpool 3
- Ann West Med & Surg**—*Annals of Western Medicine and Surgery* The Los Angeles County Medical Association 1925 Wilshire Blvd Los Angeles 5
- Antiseptic**—*The Antiseptic* 323 Thambu Chetty Street G T Madras
- Ap respir y tuberc ,Santiago**—*Aparato respiratorio y tuberculosis* Correo 11 Santiago de Chile
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- Arch argent de pediat**—*Archivos argentinos de pediatria* Belgrano 2563 Buenos Aires (Continuation of *Arch latino am de pediat*)
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- Arch belges dermat et syph**—*Archives belges de dermatologie et de syphiligraphie* 64 rue de la Concorde Bruxelles
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- Arch brasil de med**—*Archivos brasileiros de medicina* Rua Evaristo da Veiga 16 Rio de Janeiro
- Arch cubanos cancerol**—*Archivos cubanos de cancerología* Organó oficial del Instituto del Radium Hospital Ntra Sra de las Mercedes La Habana Calle 21 Vedado Habana
- Arch Dermat & Syph**—*Archives of Dermatology and Syphilology* American Medical Association 535 N Dearborn St Chicago 10
- Arch f Dermat u Syph**—*Archiv für Dermatologie und Syphilis* Springer Verlag OHG Mölkerbastei 5 Wien I
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- Arch 'E Maragliano' pat e clin**—*Archivio 'E Maragliano' di patologia e clinica* Viale Benedetto 15 Genova
- Arch españ urol**—*Archivos españoles de urología* Atocha 115, Madrid
- Arch exper Path u Pharmakol**—*Naunyn Schmiedeberg's Archiv für experimentelle Pathologie und Pharmakologie* Springer Verlag Limkstrasse 22/24 Berlin W 9

- Arch farm y bioquím Tucumán** — *Archivos de farmacia y bioquímica de Tucumán. Facultad de farmacia y bioquímica, Universidad nacional de Tucumán, Ayacucho 482 Tucumán, República Argentina*
- Arch fisiol** — *Archivio di fisiologia. Ditta Editrice Luigi Niccolai Via Faenza 58, Firenze*
- Arch franç pédiat** — *Archives françaises de pédiatrie. Gaston Deau & Cie, 8, place de l'Odéon Paris 6<sup>e</sup> Masion & Cie, 120 Bd St-Germain Paris 6<sup>e</sup> (Continuation of Arch de m&J d ent. Bull Soc pédiat de Paris and Rev franç de pédiat)*
- Arch f d ges Physiol** — *Physiologische Archiv für die gesamte Physiologie des Menschen und der Tiere. Springer-Verlag Langstrasse 22-24, Berlin W 9*
- Arch histol norm y pat** — *Archivos de histología normal y patológica. Institución Cultural Española. Buenos Aires*
- Arch Hosp clín niños Roberto del Río** — *Archivos del Hospital clínico de niños Roberto del Río. A. Zañartu 1095 Santiago Chile (Continuation of Arch d. Hosp niños Roberto del Río)*
- Arch d Hosp niños Roberto del Río.** Continued as **Arch Hosp clín niños Roberto del Río**
- Arch Hosp Santo Tomás** — *Archivos del Hospital Santo Tomás Hospital Santo Tomás Panamá H. de P*
- Arch Inst cardiol México.** — *Archivos del Instituto de cardiología de México. Calzada de la Piedad 300 México D F (Continuation of Arch latino am de cardiol y hemat)*
- Arch Inst cir prov Buenos Aires** — *Archivos del Instituto de cirugía de la provincia de Buenos Aires Hariso República Argentina*
- Arch Inst nac cardiol** See **Arch Inst cardiol México**
- Arch Inst Pasteur de l'Afrique du Nord** See **Arch Inst Pasteur d'Algérie** and **Arch Inst Pasteur de Tunis**
- Arch Inst Pasteur d'Algérie** — *Archives de l'Institut Pasteur d'Algérie. Alger, 11 83 Alger Algérie*
- Arch Inst Pasteur de Tunis.** — *Archives de l'Institut Pasteur de Tunis. Secretary, Institut Pasteur de Tunis. Tunis.*
- Arch Int Med** — *Archives of Internal Medicine. American Medical Association, 535 N Dearborn St. Chicago 10*
- Arch internat de neurol** — *Archives internationales de neurologie. J. Peyronnet & Cie 33 rue Vivienne, Paris 2<sup>e</sup>*
- Arch internat de pharmacodyn et de thérap** — *Archives internationales de pharmacodynamie et de thérapie. 3, Albert Racetswenkari, Gent*
- Arch internat de physiol** — *Archives internationales de physiologie. A. Vaillant Carminne, 4 place St-Michel, Liège*
- Arch ital chir.** — *Archivio italiano di chirurgia. L. Cappelli, Via Farini 6, Bologna*
- Arch ital dermat inf** — *Archivio italiano di dermatologia, sifilografia e venerologia. L. Cappelli, Via Farini, 6, Bologna*
- Arch ital laring** — *Archivio italiano di laringologia. R. Vito-Mauro, Via Gennaro Serra, 24, Napoli (105)*
- Arch ital mal app diger** — *Archivio italiano delle malattie dell'apparato digerente. L. Cappelli. Via Farini, 6 Bologna*
- Arch ital di otol.** — *Archivio italiano di otologia, rinologia e laringologia. Via Primo Tatti N. 3, Como*
- Arch ital pediat e puericult** — *Archivio italiano di pediatria e puericoltura. L. Cappelli, Via Farini, 6, Bologna*
- Arch ital urol** — *Archivio italiano di urologia. L. Cappelli. Via Farini 6 Bologna*

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- Arch.d.mal du cœur —Archives des maladies du cœur et des vaisseaux J B Baillière et  
fils 19 rue Hautefeuille Paris 6°
- Arch.d.mal profes —Archives des maladies professionnelles de médecine du travail et  
de sécurité sociale Masson & Cie 120 Boulevard Saint Germain Paris 6°
- Arch.méd d'Angers —Archives médicales d'Angers 8 Rue de Nl Air Angers
- Arch.med belg ,Bruxelles —Archiva medica belgica 64 rue de la Concorde Bruxelles
- Arch.méd belges —Continued as Arch serv san l'armée belge
- Arch.méd-chir de l'app respir —Archives médico-chirurgicales de l'appareil respira-  
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- Arch.de med.d.enf —Merged with Arch franç pédiat
- Arch.de med inf —Archivos de medicina infantil Apartado 2457 Habana
- Arch.med int. —Archivos de medicina interna Apartado 2053 Habana
- Arch.med mex —Archivos médicos mexicanos Bolivar 297 Monterrey Nuevo León  
México
- Arch.med sociale —Archives de médecine sociale J B Baillière et fils 19 rue Haute-  
feuille, Paris 6°
- Arch.neerl de physiol —Archives néerlandaises de physiologie de l'homme et des  
animaux Prof G van Rijnberk Rapenburgerstraat 136 Amsterdam
- Arch Neurol & Psychiat —Archives of Neurology and Psychiatry American Medical  
Association 535 N Dearborn St Chicago 10
- Arch.oftal Buenos Aires —Archivos de oftalmología de Buenos Aires Perú 795 Buenos  
Aires
- Arch.d opht —Archives d'ophtalmologie Masson & Cie 120 Boulevard Saint Germain  
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- Arch.Ophth —Archives of Ophthalmology American Medical Association 535 N  
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- Arch.forthop u Unfall-Chir —Archiv für orthopädische und Unfall Chirurgie mit  
besonderer Berücksichtigung der Frakturenlehre und der orthopädisch-chir-  
urgischen Technik Springer Verlag OHG Mülkerbastei 5 Wien I
- Arch.ortop —Archivio di ortopedia L Cappelli Via Farini 6 Bologna
- Arch.ostet e ginec —Archivio di ostetricia e ginecologia S Andrea delle Dame 17,  
Napoli
- Arch.Otolaryng —Archives of Otolaryngology American Medical Association 535 N  
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- Arch.oftal —Archivio di oftalmologia Prof V Rossi R Clinica Oculistica Pisa
- Arch.pat e clin med —Archivio di patologia e clinica medica L Cappelli Via Farini 6  
Bologna
- Arch.Path —Archives of Pathology American Medical Association 535 N Dearborn St  
Chicago 10
- Arch.Pediat —Archives of Pediatrics E B Treat & Co, 45 E 17th St New York 3
- Arch.de pediat d Uruguay —Archivos de pediatría del Uruguay Av Agraciada 1444  
Montevideo

- Arch peruanos pat y clin — Archivos peruanos de patología y clínica Hospital 2 de Mayo, Departamento de patología Lima Perú
- Arch Phys Med — Archives of Physical Medicine Official Journal American Congress of Physical Medicine 30 N Michigan Ave., Chicago 2 (Continuation of Arch Phys Therapy)
- Arch Phys Therapy — Continued as Arch Phys Med
- Arch pueol, neurol e psiquiat — Archivio di pediatria, neurologia e psichiatria Piazza S. Ambrogio N. 9, Milano
- Arch f Psychiat — Archiv für Psychiatrie und Nervenkranheiten Springer Verlag OHG Mölkerbastei 5 Wien I
- Arch de psychol — Archives de psychologie J. Piaget & A. Rey 52 Rue des Iaquis Genève
- Arch radiol — Archivio di radiologia Casella Postale 147, Napoli
- Arch rhumatol — Archives de rhumatologie 13 rue Puits Gaillot Lyon
- Arch di sc biol — Archivio di scienze biologiche (fisiologia farmacologia patologia sperimentale) I Cappella Via Farini 6 Bologna
- Arch per le sc med — Archivio per le scienze mediche Via Martini della Libertà 15 Torino
- Arch serv san l'armée belge — Archives du service de santé de l'armée belge 12 Boulevard Saint Michel Bruxelles (Continuation of Arch méd belges)
- Arch Soc argent de anat norm y pat — Archivos de la Sociedad argentina de anatomía normal y patológica Santa Fe 1171 Buenos Aires
- Arch Soc de biol de Montevideo — Archivos de la Sociedad de biología de Montevideo Cailla Cerrito 567 Montevideo
- Arch Soc cirujanos hosp — Archivos de la Sociedad de cirujanos de hospital Cailla 2443 Santiago de Chile
- Arch Soc oftal hispano-am — Archivos de la Sociedad oftalmológica hispano-americana Serrano 93 Madrid
- Arch Surg — Archives of Surgery American Medical Association 535 N Dearborn St., Chicago 10
- Arch urug de med, cir y especialid — Archivos uruguayos de medicina cirugía y especialidades Federación de las sociedades médico-científicas del Uruguay, Avda General Flores 2144 Montevideo
- Arch "de Vecchi" per anat pat e med clin — Archivio de Vecchi per l'anatomia patologica e la medicina clinica Via degli Alfani 37 Firenze
- Arch venezol puericult y pediat — Archivos venezolanos de puericultura y pediatría Apartado 1428 Caracas
- Arch venezol Soc de oto-rino-laring, oftal, neurol — Archivos venezolanos de la Sociedad de oto-rino-laringología oftalmología neurología Apartado 1428, Caracas
- Arizona Med — Arizona Medicine Journal of Arizona State Medical Association 422 Heard Bldg Phoenix
- Army M Bull — Continued as Bull U S Army M Dept
- Arq assist psicopat estad São Paulo — Arquivos da assistência a psicopatas do estado de São Paulo Hospital de Juqueri Estação de Juqueri S P R São Paulo (Continuation of Arq Serv assist psicopat estad São Paulo)
- Arq de biol — Arquivos de biologia Rua São Luiz, 161, São Paulo
- Arq brasil de cir e ortop — Arquivos brasileiros de cirurgia e ortopedia Rua da Imperatriz 83, Recife Pernambuco Brasil (Continuation of Arq de cir e ortop)
- Arq brasil de oftal — Arquivos brasileiros de oftalmologia Caixa Postal, 4086 São Paulo

- Arq brasil urol — Arquivos brasileiros de urologia Sob os auspícios da Cadeira de urologia da Faculdade de medicina da Universidade de São Paulo e do Colégio brasileiro de urologistas Caixa Postal 297, São Paulo
- Arq de cir clin e exper — Arquivos de cirurgia clínica e experimental Dept de técnica cirúrgica e cirurgia experimental da Faculdade de medicina da Universidade de São Paulo Caixa Postal 4066, São Paulo
- Arq de dermat e sif de São Paulo — Arquivos de dermatologia e sifilografia de São Paulo Rua Libero Badaró, 488, São Paulo (Continuation of Arch de dermat e siph de São Paulo)
- Arq de hig e saúde pub, São Paulo — Arquivos de higiene e saúde pública Alameda Barão de Limeira 458, São Paulo
- Arq Inst bact Câmara Pestana — Arquivos do Instituto bacteriológico Câmara Pestana Lisboa
- Arq Inst biol, São Paulo — Arquivos do Instituto biológico Caixa Postal 119 A São Paulo (Continuation of Arch Inst biol)
- Arq mineir leprol — Arquivos mineiros de leprologia Órgão oficial da Sociedade mineira de leprologia Belo Horizonte, Minas Gerais Brasil
- Arq neuro-psiquiat, São Paulo — Arquivos de neuro-psiquiatria Caixa Postal 3461, São Paulo
- Ateneo parmensis — L'ateneo parmensis Organo delle Facoltà di medicina e di scienze Università di Parma Palazzo Universitario Parma
- biologia — clinica e terapia Via di Prussia 101,
- Australian & New Zealand J — Butterworth & Co Ltd 8 O Connor Surgeons, Australasia)
- Australian J Exper Biol & Med Sc — Australian Journal of Experimental Biology and Medical Science University of Adelaide Adelaide
- Avenir med — L'avenir médical 18 rue Saint Nestor Lyon
- Bact. Rev — Bacteriological Reviews Williams & Wilkins Co., Mt Royal and Guilford Aves, Baltimore 2
- Balneologe — Der Balneologe Springer Verlag OHG Mülkerbastei 5 Wien I
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- Beitr z Klin Tuberk — Beiträge zur Klinik der Tuberkulose und speziellen Tuberkulose Forschung Springer Verlag OHG Mülkerbastei 5 Wien I
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- Bol Asoc méd de Puerto Rico.** Boletín de la Asociación médica de Puerto Rico. Avenida Manuel Fernández Juncos. Casa 12. Santurce. San Juan
- Bol Asoc méd Santiago.** Boletín de la Asociación médica de Santiago. Calle José Trujillo Valdez N<sup>o</sup> 133 Santiago de los Caballeros. Rep. Dominicana
- Bol clin e estat hosp civil de Lisboa.** Boletim clinico e de estatística dos hospitais civis de Lisboa. Hospital de São José Lisboa
- Bol clin, Univ Antioquia.** Boletín clínico. Universidad de Antioquia. Órgano de la Facultad de medicina de la Universidad de Antioquia. Medellín Colombia
- Bol d Dep salud pub, México.** Boletín del Departamento de salubridad pública México 17 1
- Bol hosp, Caracas.** Boletín de los hospitales civiles del Distrito Federal. Apartado de Correos 1429 Caracas
- Bol d Hosp policía nac.** Boletín del Hospital de la policía nacional. Oquendo y Farfella Habana
- Bol d Hosp -San "El Peral."** Boletín del Hospital-Sanatorio "El Peral" enfermedades broncopulmonares y tuberculosis. Estación "Los Quillayes" Santiago Chile
- Bol d Inst clin quir.** Boletín del Instituto de clínica quirúrgica. Universidad de Buenos Aires. Paraguay 2150 Buenos Aires
- Bol Inst internac. am. de protec a la infancia.**—Boletín del Instituto internacional americano de protección a la infancia. Calle 18 de Julio 1648 Montevideo
- Bol Inst de med exper para el estud y trat d cáncer.** Boletín del Instituto de medicina experimental para el estudio y tratamiento del cáncer. [With French, German and English summaries.] Av. San Martín 5481 Buenos Aires
- Bol Liga contra el cáncer.**—Boletín de la Liga contra el cáncer. Edificio del Instituto del Cáncer Habana
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- Bol y trab, Acad argent de cir**—Boletines y trabajos Academia argentina de cirugía Junin 845, Buenos Aires (Continuation of Bol y trab, Soc de cir de Buenos Aires)
- Bol y trab, Soc argent de cirujanos**—Boletines y trabajos Sociedad argentina de cirujanos Asociación médica argentina Santa Fe 1171 Buenos Aires
- Bol y trab Soc de cir de Buenos Aires**—Continued as Bol y trab, Acad argent de cir
- Bol y trab, Soc de cir de Córdoba**—Boletines y trabajos : Sociedad de cirugía de Córdoba Colon 637 Córdoba Argentina
- Boll d. lit. sieroterap milanese**—Bollettino dell Istituto sieroterapico milanese 20 Via Darwin Milano 124
- Boll d mal d orecchio, d gola, d naso**—Bollettino delle malattie dell orecchio della gola del naso di tracheo-bronco-esofagoscopia e di fonetica Piazza Madonna 1 Firenze
- Boll e mem Soc piemontese chir**—Bollettino e memorie della Società piemontese di chirurgia Torino
- Boll d oculi**—Bollettino d oculistica L. Cappelli Via Farini 6 Bologna
- Boll d sez ital d Soc internaz di microbiol**—Continued as Boll d Soc ital di microbiol
- Boll Soc ital biol sper**—Bollettino della Società italiana di biologia sperimentale Casa Editrice Idelson Via E. de Marinis N 19 Napoli
- Boll d Soc ital de microbiol**—Bollettino della Società italiana di microbiologia Via Darwin 20 Milano 124 (Continuation of Boll d sez ital d Soc internaz di microbiol)
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- Boll Soc med -chir Pavia**—Bollettino della Società medico-chirurgica Tipografia già Cooperativa Viale dell Impero 12 Pavia
- Bordeaux chir**—Bordeaux chirurgical 11 rue Albert de Mun Bordeaux
- Brain**—Brain A Journal of Neurology Macmillan & Company Ltd St Martin's St, London WC 2 (American office—60 Fifth Ave New York 11)
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- Brit Dent J**—The British Dental Journal 13 Hill St Berkeley Sq London W 1
- Brit Heart J**—British Heart Journal British Medical Association Tavistock Sq London WC 1
- Brit J Anæsth**—British Journal of Anæsthesia 57 Church St Old Isleworth Middlesex
- Brit J Dermat**—British Journal of Dermatology and Syphilis H. K. Lewis & Co Ltd 136 Gower St London WC 1
- Brit J Exper Path**—The British Journal of Experimental Pathology H. K. Lewis & Co Ltd 136 Gower St London WC 1
- Brit J Indust Med**—British Journal of Industrial Medicine British Medical Association Tavistock Sq London WC 1
- Brit J M Psychol**—British Journal of Medical Psychology (Medical Section of British Journal of Psychology) Cambridge University Press Bentley House, 200 Euston Rd London NW 1 (American agent—University of Chicago Press, 58th St and Ellis Ave Chicago)
- Brit J Ophth**—The British Journal of Ophthalmology Geo E. Pulman & Sons Ltd 24 Thayer St Marylebone London W 1



- Brit J Pharmacol** British Journal of Pharmacology and Chemotherapy The British Pharmacological Society British Medical Association Tavistock Square London W C 1
- Brit J Phys Med** British Journal of Physical Medicine and Internal Hygiene 4 5 & 6 Bell Yard Temple Bar London W C 2
- Brit J Radiol** British Journal of Radiology British Institute of Radiology 32 Welbeck St London W 1
- Brit J Social Med** British Journal of Social Medicine British Medical Association House Tavistock Square London W C 1
- Brit J Surg** British Journal of Surgery J P Wright & Sons Ltd Print 1 (American agent Williams & Wilkins Co Mt Royal and Guilford Aves Balt more 2)
- Brit J Tuberc** British Journal of Tuberculosis and Diseases of the Chest Ballière Tindall & Cox 7 and 8 Henrietta St London W C 2
- Brit J Urol** British Journal of Urology Coombe House 28 Orchard St Bristol 1
- Brit J Ven Dis** The British Journal of Venereal Diseases Constable & Co 10 Orange St Leicester Sq London W C 2
- Brit M Bull** British Medical Bulletin Medical Department The British Council 3 Hammer St London W 1
- Brit M J** British Medical Journal British Medical Association House 19 Tavistock Sq London W C 1
- Brooklyn Hosp J** The Brooklyn Hospital Journal DeKalb Ave & Ashland Place, Brooklyn N Y
- Bruxelles-méd** Bruxelles-médical Revue belge des sciences médico-chirurgicales Léopold Mayer (Ed) 141 rue Belliard Bruxelles
- Bull Acad de méd, Paris** Continued as Bull Acad nat méd
- Bull Acad Med, Toronto** Bulletin of the Academy of Medicine 13 Queen's Park, Toronto
- Bull Acad méd Roumanie** Bulletin de l'Académie de médecine de Roumanie Masson & Co 120 Boulevard Saint Germain Paris 6<sup>e</sup>
- Bull Acad nat méd** Bulletin de l'Académie nationale de médecine Masson & Co 120 Boulevard Saint Germain Paris 6<sup>e</sup> (Continuation of Bull Acad de méd Paris)
- Bull Acad roy de méd de Belgique** Bulletin de l'Académie royale de médecine de Belgique Imprimerie Médicale et Scientifique (See An) 34 rue Lotanique Bruxelles
- Bull Am A M Rec Lib** Continued as J Am A M Rec Lib
- Bull Am Acad Tuberc Physicians** Continued as Tuberculosis
- Bull Am Coll Surgeons** Bulletin of the American College of Surgeons 401 Erie St, Chicago
- Bull Assoc franç p l'étude du cancer** Bulletin de l'Association française pour l'étude du cancer Masson & Co 120 Boulevard Saint Germain Paris 11<sup>e</sup>
- Bull Assoc B méd de lang franç de l'Amérique du Nord** Incorporated in Union méd du Canada
- Bull Ayer Clin Lab, Pennsylvania Hosp** Bulletin of the Ayer Clinical Laboratory of the Pennsylvania Hospital Philadelphia 7
- Bull biol B méd expér URSS** See Byull eksper biol i med
- Bull Georgetown Univ M Center** The Bulletin Georgetown University Medical Center Georgetown University School of Medicine Washington 7 D C
- Bull Health Organ, League of Nations** Bulletin of the Health Organization of the League of Nations Publications Department of the League of Nations Geneva

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- Bull Hyg**—Bulletin of Hygiene Bureau of Hygiene & Tropical Diseases Keppel St Gower St London WC 1
- Bull Inst Pasteur**—Bulletin de l'Institut Pasteur Masson & Cie 120 Boulevard Saint Germain Paris 6<sup>e</sup>
- Bull internat serv san**—Bulletin international des services de santé des armées de terre de mer et de l'air Office international de documentation de médecine militaire Liege
- Bull Johns Hopkins Hosp**—Bulletin of the Johns Hopkins Hospital Johns Hopkins Press Baltimore III
- Bull Los Angeles Neurol Soc**—Bulletin of the Los Angeles Neurological Society Dr Clarence W Olsen 312 N Boyle Ave Los Angeles
- Bull M Library A**—Bulletin of the Medical Library Association Miss Bertha H Hallam Treasurer Medical Library Association Medical Library University of Oregon Medical School Portland
- Bull Mason Clin**—Bulletin of the Mason Clinic 1115 Terry Ave Seattle Wash (Continuation of Clin Virginia Mason Hosp)
- Bull med, Paris**—Le bulletin médical Librairie Arnette 2 rue Casimir Delavigne Paris 6<sup>e</sup>
- Bull et mem Soc franç d opht**—Bulletins et mémoires de la Société française d'ophtalmologie Masson & Cie 120 Boulevard Saint Germain Paris 6<sup>e</sup>
- Bull et mem Soc med d hôp de Paris**—Bulletins et mémoires de la Société médicale des hôpitaux de Paris Masson & Cie 120 Boulevard Saint Germain Paris 6<sup>e</sup>
- Bull et mem Soc méd Paris**—Bulletins et mémoires de la Société de médecine de Paris Librairie Maloine 27 rue de l'École de Médecine Paris
- Bull et mem Soc nat de chir**—Continued as Mém Acad de chir
- Bull Menninger Clin**—Bulletin of the Menninger Clinic The Menninger Clinic Topeka
- Bull New England M Center**—Bulletin of the New England Medical Center 30 Bennett St Boston 11
- Bull New York Acad Med**—Bulletin of the New York Academy of Medicine 2 E 103rd St, New York 29
- Bull New York M Coll Flower & Fifth Ave Hosps**—Bulletin New York Medical College Flower and Fifth Avenue Hospitals 1 East 105th St New York 29 (Continuation of New York M Coll & Flower Hosp Bull)
- Bull Office Internat d hyg pub**—Bulletin de l'Office international d'hygiène publique 195 Boulevard Saint Germain Paris VII<sup>e</sup>
- Bull Post Grad Comm Med, Univ Sydney**—Bulletin of the Post Graduate Committee in Medicine University of Sydney Sydney NSW Australia
- Bull Pract Ophth**—Bulletin of Practical Ophthalmology Greens Eye Hospital Bush and Octavia Streets San Francisco
- Bull sc. med Bologna**—Bullettino delle scienze mediche Società medica chirurgica Piazza Galvani 1 Bologna
- Bull School Med Univ Maryland**—Bulletin of the School of Medicine University of Maryland 519 W Lombard St Baltimore (Continuation of Bull Univ Maryland School Med)

- Collect. Papers Mayo Clin & Mayo Found** — Collected Papers of the Mayo Clinic and the Mayo Foundation W. B. Saunders Company W. Washington Sq., Philadelphia 5
- Compens Med** — Compensation Medicine 501 Fifth Ave. New York 17
- Compt rend Acad sc** — Comptes rendus hebdomadaires des séances de l'Académie des sciences (author: Villars) 55 Quai des Grands Augustins Paris 6°
- Compt rend. Soc de biol** — Comptes rendus des séances de la Société de Biologie Maison III Cie 120 Boulevard Saint Germain Paris 6°
- Confinia neurol** — Confinia neurologica S. Karger Holheimstrasse 22 Basel
- Connecticut MJ** — The Connecticut State Medical Journal Dr Stanley B. Weld 54 Church St. Hartford 3 (Continuation of J. Connecticut M. Soc.)
- Crón méd., Lima** — La crónica médica Apartado 2563 Lima
- Cultura méd** — Cultura médica Rua Ipiranga 33 Rio de Janeiro
- Current Researches in Anesth & Analg** — See Anesth & Analg
- Dallas MJ** — The Dallas Medical Journal 1521 Medical Arts Bldg. Dallas Texas
- Delaware State MJ** — Delaware State Medical Journal 618 Citizens Bank Bldg. Wilmington
- Dermatologica** — Dermatologica S. Karger Holheimstrasse 22 Basel (Continuation of Dermat Ztschr.)
- Dermatofilograf** — Il dermatofilografo Via Martiri della Libertà 15 Torino
- Deut. Militärarzt** — Der deutsche Militärarzt Springer Verlag Langstrasse 22-24 Berlin, W. 9
- Deutsche med. Wchnschr.** — Deutsche medizinische Wochenschrift Georg Thieme, Rowaplatz 12 Leipzig C. 1
- Deutsche Ztschr. f. Chir.** — Deutsche Zeitschrift für Chirurgie Springer Verlag Langstrasse 22-24 Berlin W. 9
- Deutsches Tuberk.-Bl.** — Deutsches Tuberkulose Blatt Sonderbeilage zur Deutschen medizinischen Wochenschrift Georg Thieme Rowaplatz 12 Leipzig C. 1
- Dia méd** — Dia médico Córdoba 2023 Buenos Aires
- Diag & trait** — Diagnostica & traitements 13 rue Puits-Gaillot Lyon
- Digest Neurol & Psychiat, Inst of Living** — Digest of Neurology and Psychiatry The Institute of Living 200 Retreat Ave. Hartford 2 Conn. (Continuation of Abstr. & Trans. Inst. of Living)
- Diplomate** — The Diplomat National Board of Medical Examiners 225 S. 15th St., Philadelphia 2
- Dis of Chest** — Diseases of the Chest (including Spanish summaries) 500 N. Dearborn St., Chicago 10
- Dis Eye, Ear, Nose & Throat** — Incorporated in Eye, Ear, Nose & Throat Monthly
- Dis Nerv System** — Diseases of the Nervous System 500 N. Dearborn St. Chicago 10
- Duodecim** — Published in Nord med
- East African MJ** — The East African Medical Journal East African Standard Ltd Nairobi Kenya Colony (Continuation of Kenya & East African M. J.)
- Edinburgh MJ** — Edinburgh Medical Journal Oliver and Boyd, Tweeddale Court Edinburgh
- Encéphale** — L'encéphale journal de neurologie et de psychiatrie Supplément à l'hygiène mentale Guston Doin & Cie 8 Place de l'Odéon, Paris 6°
- Endocrinology** — Endocrinology Bulletin of the Association for the Study of Internal Secretions Charles C. Thomas 301-327 E. Lawrence Ave. Springfield Ill
- Enzymologia** — Enzymologia W. Junk N. Z. Voorburgwal 64, Amsterdam (C)

*Periodicals Listed in Quarterly Cumulative Index Medicus*

- Ergebn. Anat u. Entwicklungsgesch.**—Ergebnisse der Anatomie und Entwicklungsgeschichte Springer-Verlag OHG Molkereibastei 5, Wien 1
- Exper. Med & Surg.**—Experimental Medicine and Surgery Brooklyn Medical Inc., 64 E. 50th St., New York 22
- Experientia.**—Experientia Monatschrift für das gesamte Gebiet der Naturwissenschaften Verlag Birkhäuser AG, Elisabethenstrasse 15, Basel 10
- Eye, Ear, Nose & Throat Monthly.**—The Eye Ear, Nose & Throat Monthly, a Professional Journal for the Eye Ear, Nose & Throat Specialist Room 1800 5 N. Wabash Chicago 2
- Federation Bull.**—Federation Bulletin The Federation Press 535 N. Dearborn Chicago 10
- Federation Proc.**—Federation Proceedings Federation of American Societies for Experimental Biology 19 West Chase St. Baltimore 1
- Finska lak-sällsk. handl.**—Published in Nord med
- Fiziol. zhur.**—Fiziologicheskii zhurnal SSSR Vsesoyuzenskoe Biologicheskoe posel V IEM, Moscow
- Folha med.**—A folha medica Casca Postal 2654 Rio de Janeiro
- Folia anatomica conimbr.**—Folia anatomica universitatis conimbrigensis (Proprietate Institut d'histologie et d'embryologie et du Laboratoire d'anatomie) Casca Portugal
- Folia cardiologica.**—Folia cardiologica organo del gruppo cardiologico italiano Agnese, 18 Milano
- Folia med.**—Folia medica Istituto di medicina del lavoro della Università Napoli
- Food Research.**—Food Research Garrard Press Champaign Ill
- Fortschr. d. Neurol. Psychiat.**—Fortschritte der Neurologie Psychiatrie und Grenzgebiete Übersichten und Forschungsergebnisse Georg Thieme 112 Leipzig, C 1
- Gac. med. de Caracas.**—Gaceta médica de Caracas Organo de la Academia Nacional de Medicina, Apartado de Correos 804 Caracas
- Gac. med. españ.**—Gaceta médica española Apartado 6026 Madrid
- Gac. méd. de México.**—Gaceta médica de México Apartado postal 8075 México
- Gastroenterologia.**—Gastroenterologia S. Karger Holbeinstrasse 22 Basel (Continuation of Arch. f. Verdauungskr.)
- Gastroenterology.**—Gastroenterology Official Journal of the American Gastrological Association Williams & Wilkins Co. Mt. Royal and E. 6th St. Baltimore 2
- Gaz. clin.**—Gazeta clinica Publicação medica paulista Rua Maria Lippert 11 Paulo
- Gazz. med. ital.**—Gazzetta medica italiana Via Giuseppe Verdi 6 Milano
- Gen. Pract. Clin.**—General Practice Clinics 1720 M St. N. W. Washington D. C.
- Gen. Practitioner.**—The General Practitioner of Australia and New Zealand 14 Rd. Elsternwick S. 4 Victoria Australia
- Geneesk. bl. u. klin. en lab. v. d. prakt.**—Geneeskundige bla. en tijdschr. v. d. prakt. voor de praktijk de Erven F. Bohn Postgros 5403 Haarlem (Holland)
- Geneesk. gids.**—Geneeskundige gids Vakblad voor geneeskundige wetenschappen Bezuidenhout 9 Den Haag
- Geneesk. tijdschr. v. Nederl. Indië.**—Geneeskundige tijdschr. v. Nederl. Indië G. Kolff & Co. Petjo-nongan 72 Batavia C. Java

- Genet Psychol Monogr** —Genetic Psychology Monographs The Journal Press, 2 Commercial St Provincetown, Mass
- Genetica** —Genetica Nederlandsch tijdschrift voor erfelijkheid- en afstammingsleer Martinus Nijhoff s Gravenhage
- Geriatrics** —Geriatrics Official Journal of the American Geriatrics Society 84 South 10th St Minneapolis 2
- Ginecologia** —La ginecologia Via Martiri della Libertà 15, Torino (Continuation of Bull di Soc piemontese di ostet e ginec)
- Gior Accad med Torino** —Giornale della Accademia di medicina di Torino Torino, (Continuation of Gior d e Accad di med di Torino)
- Gior di batteriol e immunol** —Giornale di batteriologia e immunologia Ospedale Maria Vittoria Via Cavour 72 Torino 11\*
- Gior di clin med** : Giornale di clinica medica Via d'Azeglio 24 Parma
- Gior italianest e analg** —Giornale italiano di anestesia e di analgesia Casella Post 491 Via Martiri della Libertà 15 Torino
- Gior ital dermat e sif** —Giornale italiano di dermatologia e sifilologia Via Pace 9, Milano
- Gior med d Marca trevig** —Giornale medico della Marca trevigiana Istituto di Anatomia patologica dell'Ospedale civile di Treviso Treviso Italia
- Gior med mil** —Giornale di medicina militare Ministero della Guerra Roma
- Gior di psichiat e di neuropat** —Giornale di psichiatria e di neuropatologia Ospedale Psichiatrico Provinciale, Ferrara (Continuation of Gior di psichiat clin e tecn manic)
- Gior veneto sc med** —Giornale veneto di scienze mediche Ospedale civile, Venezia
- Giza Mem Ophthalmic Lab, Ann Rep** —See Mem Ophthalmic Lab, Giza Ann Rep
- Glasgow M.J.** —Glasgow Medical Journal \* Gilmour & Laurence, 2, West Regent St., Glasgow
- Grace Hosp Bull** —The Grace Hospital Bulletin 4160 John R St., Detroit, Mich
- Growth** —Growth A Journal for Studies of Development and Increase Lankenau Hospital Research Institute Girard & Corinthian Aves., Philadelphia 30
- Guthrie Clin Bull** —The Guthrie Clinic Bulletin Medical and Surgical Staffs of the Guthrie Clinic and the Robert Packer Hospital Sayre Penn
- Guy's Hosp Gaz.** —Guy's Hospital Gazette London Bridge London, S.E. 1
- Guy's Hosp Rep** —Guy's Hospital Reports Guy's Hospital London Bridge London, S.E. 1
- Gynaecologia** —Gynaecologia S Karger Holbrunnstrasse 22 Basel (Continuation of Monatsschr f Geburtsh u Gynäk)
- Gynéc et obst** —Gynécologie et obstétrique Masson & Cie, 120 Boulevard Saint Germain, Paris 6\*
- Haematologica** —Haematologica Archivio Casella Postale 149, Pavia
- Hahneman Monthly** —The Hahnemannian Monthly 235 N. 15th St., Philadelphia 2
- Harefuah** —Harefuah Journal of the Palestine Jewish Medical Assoc., P. O. B. 1298 Tel Aviv Palestine
- Harofé Haivri** —See Hebrew M.J.
- Harper Hosp Bull** —Harper Hospital Bulletin 3825 Brush St., Detroit 1
- Harvey Lect** —The Harvey Lectures Delivered Under the Auspices of The Harvey Society of New York Under the Patronage of the New York Academy of Medicine Science Press Queen St & McGovern Ave Lancaster, Pa

- Hawaii M J —Hawaii Medical Journal Mabel L. Smyth Memorial Bldg, 510 S. Beretania St., Honolulu
- Hebrew M J —The Hebrew Medical Journal (Harofé Havra) 983 Park Ave., New York 28
- Helvet.med. acta —Helvetica medica acta Benno Schwabe & Co., Klosterberg 27 Basel 10
- Helvet.paediatr.acta —Helvetica paediatrica acta Benno Schwabe & Co., Klosterberg 27, Basel 10
- Hemat.Monogr —Hematology Monographs Michael Reese Hospital Dept of Hematology, E 29th & Elst Chicago, Ill
- Hoja fisiol —Hoja fisiológica Cailla de Correa, 2605, Montevideo
- Hoppe Seyler's Ztschr f physiol Chem Sec Ztschr f physiol Chem
- Hosp Corps Quart —The Hospital Corps Quarterly The Supplement to the United States Naval Medical Bulletin Superintendent of Documents Government Printing Office, Washington, D. C.
- Hosp Couns Bull —Hospital Council Bulletin Chicago Hospital Council, 105 W. Adams St., Chicago 3
- Hosp Management —Hospital Management 100 E. Ohio St., Chicago
- Hosp Progr —Hospital Progress 1402 S. Grand Blvd. St. Louis 4
- Hospital, London —The Hospital Official Organ of the British Hospitals Association and of the Incorporated Association of Hospital Officers Secretary I. A. H. O., 12 Grosvenor Crescent London S.W. 1
- Hospital, Rio de Janeiro —O Hospital, Caixa Postal, 2785, Rio de Janeiro
- Hospitals —Hospitals The Journal of the American Hospital Association, 18 E. Division St., Chicago 10 (Continuation of Bull Am Hosp A)
- Hospitalist —Published in Nord med
- Human Biol —Human Biology 1901 E. Madison St. Baltimore
- Human Fertil —Human Fertility Williams & Wilkins Co., Mt. Royal and Guilford Aves., Baltimore 2 (Continuation of J. Contraception)
- Hyg ment. —L'hygiène mentale (Supplément mensuel de l'Encephale) Gaston Doua & Cie, 8, place de l'Odéon Paris 6<sup>e</sup>
- Hyg-ia —Hygeia 535 N. Dearborn St. Chicago 10
- Hygeia —Published in Nord med
- Illinois M J —Illinois Medical Journal 30 N. Michigan Ave. Chicago
- Index neurol y psiquiat —Index de neurología y psiquiatría Esmeralda 909, Buenos Aires
- Indian J M Research —Indian Journal of Medical Research Thacker Spink & Co. P. O. Box 54 Calcutta
- Indian J Ophth —Indian Journal of Ophthalmology 502 Narayan Peeth Poona City, India
- Indian J Pediat —Indian Journal of Pediatrics S. C. Sakar & Sons Ltd., 1/1/1 C. College Sq. Calcutta
- Indian J Surg —Indian Journal of Surgery Sec'y Association of Surgeons of India Binfield, Kulpauk Madras
- Indian J Ven Dis —Indian Journal of Venereal Diseases and Dermatology 1 Damodar Mansions, Opera House Tram Terminus Gurgaum Bombay 4
- Indian M Gaz —Indian Medical Gazette Thacker Spink & Co. P. O. Box 54 Calcutta
- Indian M J —The Indian Medical Journal Dr. Khan Chind Wotira Treat., Chichawatni Dist. Montgomery Punjab

- Indian M Rec** —Indian Medical Record 14 Parachand Nal ar Ave., Calcutta, London Office 1 Blenheim House Arundel Street Strand W C 2
- Indian M Research Mem** —Indian Medical Research Memoirs Supplementary Series to Indian Journal of Medical Research Thacker Spink & Co., P O Box 54 Calcutta
- Indian Physician** —The Indian Physician New Queens Rd Bombay 4
- Individ Psychol Bull** —Individual Psychology Bulletin 3426 N Janney Ave., Chicago 13
- Indust & Engin Chem (Indust Ed)** —Industrial and Engineering Chemistry (Industrial Edition) 1155 16th St N W Washington D C
- Indust Med** —Industrial Medicine including Industrial Hygiene Section 403 N Michigan Ave Chicago
- Inform med, Genova** —Informazione medica Sezione clinica e scientifica Casella Postale 1512 Genova
- Inform méd, Habana** —Informaciones médicas Reina 310 Habana
- Infortun e traumatol lavoro** —Infortunistica e traumatologia del lavoro Casella Postale 491 Torino
- Infortuni e mal profes** —Infortuni e malattie professionali Piazza Cavotti 3 Roma
- Inst M Research, Federated Malay States, Studies** See Stud Inst M Research Federated Malay States
- Internat A M Museums Bull** See J Tech Methods
- Internat Abstr Surg** See Surg Gynec & Obst
- Internat J Leprosy** —International Journal of Leprosy Temporary Office Dept of Hygiene School of Medicine Western Reserve University (Cleveland 11 Ohio)
- Internat J Psycho-Analysis** —International Journal of Psycho-Analysis Baillière Tindall & Cox 7 8 Henrietta St Covent Garden London W C 2
- Internat M Digest** —International Medical Digest W F Price Co Inc Hagerstown Maryland
- Irish J M Sc** —Irish Journal of Medical Science Cahill & Co 111 Parkeate Printing Works Dublin (American agent Hafner Publishing Co Inc 31 33 E 10th St New York 3)
- J A Am M Coll** —Journal of the Association of American Medical Colleges 5 S Wabash Ave Chicago
- J A M A** —Journal of the American Medical Association 535 N Dearborn St Chicago 10
- J Abnorm & Social Psychol** —Journal of Abnormal and Social Psychology 374 Broadway Albany N Y Northwestern University Evanston Ill
- J Allergy** —The Journal of Allergy C A Mosby Co 3207 Washington Blvd St Louis 3
- J Am A M Rec Lib** —Journal of the American Association of Medical Record Librarians 161 W Harrison St Chicago 5 (Continuation of Bull Am A M Rec Lib)
- J Am Chem Soc** —Journal of the American Chemical Society 1155 15th St, N W, Washington 6 D C
- J Am Coll Dentists** —Journal of the American College of Dentists 350 Post St, San Francisco 11
- J Am Dent A** —Journal of the American Dental Association 222 E Superior St, Chicago 11
- J Am Dietet A** —Journal of the American Dietetic Association 620 N Michigan Ave, Chicago

- J. Am. Inst. Homeop.**—Journal of the American Institute of Homeopathy 1601 Chestnut St. Philadelphia 3
- J. Am. M. Women's A.**—Journal of the American Medical Women's Association Apt 406 3300 West End Ave. Nashville 5 Tenn
- J. Am. Pharm. A. (Scient. Ed.)**—Journal of the American Pharmaceutical Association (Scientific Edition) Robert P. Fischel's Sec'y 2215 Constitution Ave. N.W., Washington 7 D.C.
- J. Am. Vet. M. A.**—Journal of the American Veterinary Medical Association 600 E. Michigan Ave., Chicago 5
- J. Anat.**—Journal of Anatomy Cambridge University Press Bentley House 200 Euston Rd. London N.W. 1 (American agent—University of Chicago Press 58th St. and Ellis Ave. Chicago)
- J. Arkansas M. Soc.**—Journal of the Arkansas Medical Society 610 First National Bank Bldg. Fort Smith
- J. Aviation Med.**—The Journal of Aviation Medicine The Bruce Publishing Co. 2642 University Ave. St. Paul
- J. Bact.**—Journal of Bacteriology Williams & Wilkins Co. Mt. Royal and Guilford Aves. Baltimore 2
- J. belge de neurol et de psychiat.**—Journal belge de neurologie et de psychiatrie Avenue de la Ramée, 10 Uccle Bruxelles
- J. belge d'urolog.**—Journal belge d'urologie F. van den Branden 10 rue des Mélézeux Uccle Bruxelles
- J. Biol. Chem.**—Journal of Biological Chemistry American Society of Biological Chemists Inc. Williams & Wilkins Co. Mt. Royal and Guilford Aves. Baltimore 2
- J. Biol. Photographic A.**—The Journal of the Biological Photographic Association Leo C. Massopust Ed. Marquette University School of Medicine Milwaukee 3
- J. Bone & Joint Surg.**—The Journal of Bone and Joint Surgery The Official Publication of The American Orthopaedic Association The British Orthopaedic Association The American Academy of Orthopaedic Surgeons The Australian Orthopaedic Association The Canadian Orthopaedic Association 8 The Fenway Boston 15 45 Lincoln's Inn Fields London W.C. 2
- J. Bowman Gray School Med.**—The Journal of the Bowman Gray School of Medicine of Wake Forest College Winston Salem N.C.
- J. Cell & Comp. Physiol.**—Journal of Cellular and Comparative Physiology The Wistar Institute 36th St. and Woodland Ave. Philadelphia 4
- J. Ceylon Br. Brit. M. A.**—The Journal of the Ceylon Branch of the British Medical Association Colombo
- J. Child Psychiat.**—The Journal of Child Psychiatry 30 W. 58th St. New York 19
- J. de chir.**—Journal de chirurgie Masson & Cie 120 Boulevard Saint Germain Paris 6\*
- J. Christian M. A.**—Journal of the Christian Medical Association of India Burma and Ceylon The Wesley Press and Publishing House Mysore City India
- J. d. clin.**—Jornal dos clinicos Caixa Postal 1554 Rio de Janeiro
- J. Clin. Endocrinol.**—The Journal of Clinical Endocrinology Charles C. Thomas 301-327 E. Lawrence Ave. Springfield Ill
- J. Clin. Investigation.**—Journal of Clinical Investigation Charles A. Janeway Treasurer Children's Hospital 300 Longwood Ave. Boston
- J. Clin. Psychopath.**—Journal of Clinical Psychopathology and Psychotherapy Medical Journal Press P.O. Box 631 Monticello N.Y. (Continuation of J. Crim. Psychopath.)
- J. Colloid Sc.**—Journal of Colloid Science 125 East 23rd St. New York 10



- J Comp Neurol**—*Journal of Comparative Neurology* Wistar Institute, 5th St and Woodland Ave., Philadelphia 4
- J Comp Path & Therap**—*The Journal of Comparative Pathology and Therapeutics* H R Grubb Ltd, Poplar Walk, Croydon, Surrey
- J Comp Psychol**—*Journal of Comparative Psychology* Williams & Wilkins Co, Mt Royal and Guilford Aves, Baltimore 2
- J Connecticut M Soc**—Continued as *Connecticut M J*
- J Contraception**—Continued as *Human Fertil*
- J Crim Psychopath**—Continued as *J Clin Psychopath*
- J Dent Research**—*Journal of Dental Research* 1121 Madison St, Indianapolis
- J Egyptian M A**—Continued as *J Roy Egyptian M A*
- J Endocrinol**—*The Journal of Endocrinology* Cambridge University Press, 196 Fuston Rd, London N W 1
- J Exper Biol**—*The Journal of Experimental Biology* Cambridge University Press, Bentley House, 200 Fuston Rd, London N W 1 (American agent—University of Chicago Press, 58th St and Ellis Ave, Chicago) (Continuation of *Brit J Exper Biol*)
- J Exper Med**—*Journal of Experimental Medicine*, Rockefeller Institute for Medical Research, York Ave and 66th St, New York 21
- J Exper Psychol**—*Journal of Experimental Psychology* American Psychological Association Inc, Northwestern University, 1822 Sherman Ave, Evanston Ill
- J Exper Zool**—*Journal of Experimental Zoology* Wistar Institute, 36th St and Woodland Ave, Philadelphia 4
- J Florida M A**—*Journal of the Florida Medical Association* Box 1018, Jacksonville 1
- J franç méd et chir thorac**—*Journal français de médecine et chirurgie thoracique* Gaston Douin & Cie, 8 place de l'Odéon, Paris 6° (Continuation of *Arch méd chir de l'app respir*)
- J Franklin Inst**—*Journal of the Franklin Institute Devoted to Science and the Mechanic Arts* The Franklin Institute, Benjamin Franklin Parkway at 20th St., Philadelphia 3
- J Gen Physiol**—*Journal of General Physiology* Rockefeller Institute for Medical Research, York Ave and 66th St, New York 21
- J Gen Psychol**—*The Journal of General Psychology* 2 Commercial St., Provincetown, Mass
- J Genet Psychol**—*The Pedagogical Seminary and Journal of Genetic Psychology* 2 Commercial St, Provincetown, Mass
- J Genetics**—*Journal of Genetics* Cambridge University Press, Bentley House, 200 Fuston Rd, London N W 1 (American agent—University of Chicago Press, 58th St and Ellis Ave, Chicago)
- J Gerontol**—*Journal of Gerontology* Published for the Gerontological Society Inc. by Charles C Thomas, 301-327 East Lawrence Ave., Springfield, Ill. [Includes Non Technical Supplement]
- J Health & Phys Educ**—*Journal of Health and Physical Education* American Association for Health, Physical Education and Recreation, 1201 16th St., N W, Washington, D C (Continuation of *Am Phys Educ Rev*)
- J Helminthol**—*Journal of Helminthology* The Institute of Agricultural Parasitology, Winches Farm Drive, Hatfield Road, St Albans, England
- J Hemat**—See *Blood*
- J Hered**—*Journal of Heredity* The American Genetic Association, 1507 M N W, Washington 5 D C

- J Hist Med & Allied Sc**—Journal of the History of Medicine and Allied Sciences Henry Schuman, 20 E 70th St, New York 21
- J Home Econ**—Journal of Home Economics American Home Economics Association, 620 Mills Bldg, Washington, D C
- J de l'Hôtel-Dieu de Montréal**—Le journal de l'Hôtel Dieu de Montréal Montréal
- J Hyg**—Journal of Hygiene Cambridge University Press, Bentley House, 200 Euston Rd, London, NW 1 (American agent—University of Chicago Press, 58th St and Ellis Ave, Chicago)
- J Immunol**—Journal of Immunology, Virus Research and Experimental Chemotherapy Williams & Wilkins Co, Mt Royal and Guilford Aves, Baltimore 2
- J Indian M A**—Journal of the Indian Medical Association 23, Hindusthan Bldgs, Corporation Place, Calcutta
- J Indiana M A**—Journal of the Indiana State Medical Association 1017 Hume Mansur Bldg, Indianapolis 4
- J Indust Hyg & Toxicol**—Journal of Industrial Hygiene and Toxicology with Abstract of Literature Williams & Wilkins Co, Mt Royal and Guilford Aves, Baltimore 2
- J Infect Dis**—Journal of Infectious Diseases University of Chicago Press, 5750 Ellis Ave, Chicago
- J internat chir**—Journal international de chirurgie Masson & Cie, 120, Boulevard Saint Germain, Paris 6\*
- J Internat Coll Surgeons**—The Journal of the International College of Surgeons Dr Max Thorek, Editor, 850 W Irving Park, Chicago (Continuation of Tr Internat Coll Surgeons)
- J Invest Dermat**—The Journal of Investigative Dermatology Williams & Wilkins Co, Mt Royal and Guilford Aves, Baltimore 2
- J Iowa M Soc**—Journal of Iowa State Medical Society, 505 Bankers Trust Bldg, Des Moines 9
- J Kansas M Soc**—Journal of Kansas Medical Society 512 New England Bldg, Fifth & Kansas Ave, Topeka
- J Lab & Clin Med**—Journal of Laboratory and Clinical Medicine C V Mosby Co, 3207 Washington Blvd, St Louis 3
- J Laryng & Otol**—Journal of Laryngology and Otology Headley Brothers, 109 Kingsway, London, WC 2 (American agent—Hafner Publishing Co, Inc, 31 33 E 10th St, New York 3)
- J Louisiana State Univ School Med**—Journal of the Louisiana State University School of Medicine New Orleans
- J M A Alabama**—Journal of the Medical Association of the State of Alabama 519 Dexter Ave, Montgomery
- J M A Eire**—Journal of the Medical Association of Eire, 270 N Circular Road, Dublin
- J M A Georgia**—Journal of Medical Association of Georgia 478 Peachtree St, NE, Atlanta
- J M Soc New Jersey**—Journal of the Medical Society of New Jersey 315 W State St, Trenton 8
- J Maine M A**—Journal of the Maine Medical Association Congress Bldg, 142 High St, Portland 3, Maine (Continuation of Maine M J)
- J Med**—Continued as Cincinnati J Med
- J de méd de Bordeaux**—Journal de médecine de Bordeaux et du Sud-Ouest 6, place Saint Christoly, Bordeaux
- J de méd et chir prat**—Journal de médecine et de chirurgie pratiques Rue de Nesles, 8, Paris 6\*

- J méd franç** — *Le Journal médical français* A Pouyat, 21, rue Cassette, Paris 6\* (Temporarily suspended)
- J de méd de Lyon** — *Le Journal de médecine de Lyon* Dr Paul Malat (Ad) 52 rue Victor Hugo, Lyon
- J de méd de Paris** — *Journal de médecine de Paris* 53 rue de la Procession 15\*
- J Ment Sc** — *Journal of Mental Science* J & A Churchill 104 Gloucester Place Portman Sq, London W 1
- J Michigan M Soc** — *Journal of Michigan State Medical Society* 2020 Old Tower Pl'g Lansing 8
- J Missouri M A** — *Journal of Missouri State Medical Association* 623 Missouri Pl'g St Louis
- J Morphol** — *Journal of Morphology* Wistar Institute 36th St and Woodland Ave Philadelphia 4
- J Mt Sinai Hosp** — *Journal of the Mount Sinai Hospital* 1 E 100th St, New York
- J Nat Cancer Inst** — *Journal of the National Cancer Institute* Federal Security Agency, U S Public Health Service National Institute of Health National Cancer Institute Superintendent of Documents Government Printing Office Washington 25 D C
- J Nat M A** — *Journal of the National Medical Association* 30 Rockefeller Plaza New York
- J Nat Malaria Soc** — *The Journal of the National Malaria Society* P O Box 99\* Tallahassee Florida
- J Nerv & Ment Dis** — *Journal of Nervous and Mental Disease* 70 Pine St New York 5
- J Neurol, Neurosurg & Psychiat** — *Journal of Neurology, Neurosurgery and Psychiatry* British Medical Association BMA House Tavistock Sq, London WC 1 (Continuation of *J Neurol & Psychiat*)
- J Neuropath & Exper Neurol** — *Journal of Neuropathology and Experimental Neurology* Mt Royal and Guilford Aves Baltimore 2
- J Neurophysiol** — *Journal of Neurophysiology* Charles C Thomas 301-327 E Lawrence Ave, Springfield Ill
- J Neurosurg** — *Journal of Neurosurgery* Charles C Thomas 301-327 E Lawrence Ave Springfield 1, Ill
- J Nutrition** — *The Journal of Nutrition* Wistar Institute of Anatomy and Biology, 36th St and Woodland Ave Philadelphia 4
- J Obst & Gynaec** — *Journal of Obstetrics and Gynecology* The Official Organ of the Obstetrics & Gynecological Society of Northern India 39 Chamberlain Rd Lahore (Continuation of *J Obst & Gynaec Soc North India*)
- J Obst & Gynaec Brit Emp** — *Journal of Obstetrics and Gynecology of the British Empire* Sherratt & Son the Saint Ann's Press, Park Road Timperley, Cheshire
- J d obst & de gynéc prat** — *Journal d'obstétrique et de gynécologie pratique* III Boulevard Nauban Lille (Temporarily suspended)
- J Oklahoma M A** — *Journal of Oklahoma State Medical Association* 210 Plaza Court Oklahoma City 3
- J Omaha Mid-West Clin Soc** — *The Journal of the Omaha Mid West Clinical Society* 1036 Medical Arts Bldg Omaha
- J Optic Soc America** — *Journal of the Optical Society of America* American Institute of Physics 57 E 55th St New York 22
- J Oral Surg** — *Journal of Oral Surgery* American Dental Association, 222 E Superior St, Chicago 11

- J Palestine Arab M A**—The Journal of the Palestine Arab Medical Association Mamilla Road No 36 Jerusalem Palestine
- J Parasitol**—Journal of Parasitology New York University University Heights New York 53
- J Path & Bact.**—Journal of Pathology and Bacteriology Oliver & Boyd Tweeddale Court High St Edinburgh 1
- J Pediat**—The Journal of Pediatrics C V Mosby Co 3207 Washington Blvd St Louis 3
- J Pharmacol & Exper Therap**—Journal of Pharmacology and Experimental Therapeutics Williams & Wilkins Co Mt Royal and Guilford Aves, Baltimore 2
- J Philippine M A**—The Journal of the Philippine Medical Association 547 Herran St Manila
- J Physiol**—Journal of Physiology Cambridge University Press Bentley House 200 Euston Rd London, NW 1 (American Agent—University of Chicago Press 58th St and Ellis Ave, Chicago 37)
- J de physiol et de path gen**—Journal de physiologie et de pathologie générale Masson & Cie, 120 Boulevard Saint Germain Paris 6\*
- J d praticiens** See Rev gén de clin et de therap
- J de psychiat inf** See Ztschr f Kinderpsych at
- J Psychol**—The Journal of Psychology 2 Commercial St Provincetown Mass
- J de psychol norm et path**—Journal de psychologie normale et pathologique Presses Universitaires de France 108 Boulevard Saint Germain Paris 6\*
- J de radiol et d'electrol**—Journal de radiologie et d'électrologie Masson & Cie 120 Boulevard Saint-Germain Paris 6\*
- J Roy Army M Corps**—Journal of the Royal Army Medical Corps A M D 2 War Office Whitehall London SW 1
- J Roy Egyptian M A** Journal of the Royal Egyptian Medical Association 42 Sharia Kasr El Aini Cairo (Continuation of J Egyptian M A)
- J Roy Inst Pub Health & Hyg**—Journal of the Royal Institute of Public Health and Hygiene Incorporating Journal of State Medicine 28 Portland Place London W 1
- J Roy Nav M Serv**—Journal of the Royal Naval Medical Service Royal Naval Hosp Barrow Gurney near Bristol England
- J Roy San Inst**—Journal of the Royal Sanitary Institute 90 Buckingham Palace Road London SW 1
- J School Health**—The Journal of School Health American School Health Association 3335 Main St Buffalo 14 N Y
- J Social Hyg**—Journal of Social Hygiene American Social Hygiene Association 1790 Broadway New York 19
- . . . . .
- J Speech Disorders**—Journal of Speech Disorders American Speech Correction Association Special Education Clinics Indiana State Teachers College Terre Haute Ind
- J State Med**—Continued as J Roy Inst Pub Health & Hyg
- J Tech Methods**—Journal of Technical Methods and Bulletin of the International Association of Medical Museums Robert A Moore Ed Washington University School of Medicine Euclid Ave & Kingshighway St Louis
- J Tennessee M A**—Journal of Tennessee State Medical Association 508 Doctors Bldg Nashville

- J Thorac Surg** —The Journal of Thoracic Surgery C. V. Mosby Company, 3207 Washington Blvd., St. Louis 3
- J Trop Med** —Journal of Tropical Medicine and Hygiene John Bale Medical Publications Ltd. 83-91 Great Titchfield St. London W. 1
- J Urol** —The Journal of Urology Williams & Wilkins Co., Mt. Royal and Guilford Aves., Baltimore 2
- J d'urolog** Journal d'urologie médicale et chirurgicale Masson & Cie, 120 Boulevard Saint Germain Paris 6<sup>e</sup>
- J Ven Dis Inform** —The Journal of Venereal Disease Information Superintendent of Documents Government Printing Office Washington 25, D. C. (Continuation of Ven Dis Inform)
- Jamaica M Rev** —The Jamaica Medical Review 95 Church St., Kingston, Jamaica
- Journal Lancet** Journal Lancet Representing the Medical Profession of Minnesota, North Dakota, South Dakota and Montana 507 Essex Bldg., E 15 10th St., Minneapolis 2
- Kentucky M J** —Kentucky Medical Journal 519 10th St. Bowling Green
- Khirurgiya** Khirurgiya Orlikov per 3 Medits Moskva
- Klin med** Klinicheskaya medicina Orlikov per 3 Medits Moskva
- Klin Wchasehr** Klinische Wochenschrift Springer Verlag Neuenheimer Landstrasse 24 Heidelberg
- Kuba** Continued as Rev. Kuba
- Lahey Clin Bull** The Lahey Clinic Bulletin 605 Commonwealth Ave., Boston 15
- Lancet** Lancet Adam St. Adelphi London W. C. 2 Oxford University Press (American Branch) 114 Fifth Ave. New York 11
- Laryngoscope** Laryngoscope 640 S. Kingshighway, St. Louis 10
- Lattante** Il lattante Via S. Chiara 6 Parma
- Laval méd.** Laval médical Faculté de médecine Université Laval, Québec. (Continuation of Bull. Soc. méd. d'hôp. Universitaires de Québec)
- Leech** —The Leech The Official Journal of the Students' Medical Council, University of the Witwatersrand Medical School Johannesburg
- Lék listy** Lékařské listy časopis lékařské společnosti a žup moravských Staré město ulice č. 19 21 Brno Czechoslovakia
- Leprosy Rev** Leprosy Review The British Empire Leprosy Relief Association 25 Alderport Ave. London N. W. 3
- Lisboa méd** Lisboa médica jornal mensal de medicina e cirurgia Hospital Escolar de Santa Marta Lisboa
- Liverpool Med-Chir J** —Liverpool Medico-Chirurgical Journal Medical Institution 114 Mt. Pleasant Liverpool 3
- Lotta contro tuberc** —Lotta contro la tubercolosi Via Nazionale, 200, Roma
- Lyon chir** —Lyon chirurgical Masson & Cie, 120 Boulevard Saint Germain, Paris 6<sup>e</sup>
- Lyon méd** —Lyon médical 12 rue de la Barre, Lyon
- M Ann District of Columbia** —Medical Annals of the District of Columbia, 1718 M St. N. W. Washington, D. C.
- M Arts & Sc** —Medical Arts and Sciences A Scientific Journal of the College of Medical Evangelists Review and Herald Publishing Assoc., Takoma Park, Washington 12 D. C.
- M Bull, Bombay** —The Medical Bulletin 'Back Bay View,' Opp. Charni Road Gardens New Queen's Road, Bombay 4

- M Clin. North America.—The Medical Clinics of North America W B Saunders Co, W Washington Sq, Philadelphia 5
- M J. Australia.—Medical Journal of Australia Scamers St Glebe, Sydney, N S W
- M Officer.—The Medical Officer Whitefriars House 72/78, Fleet St, London, E C 4
- M Press.—The Medical Press 8, Henrietta St, Covent Garden London W C 2
- M Radiog & Photog.—Medical Radiography and Photography Eastman Kodak Co Rochester 4 N Y (Continuation of Radiog & Clin Photog)
- M Rec.—Medical Record 215 4th Ave New York 3
- M Rec & Ann.—The Medical Record and Annals 1304 Walker Ave Houston Tex
- M Statist Bull, Sel Serv Syst.—Medical Statistics Bulletin Selective Service System National Headquarters Selective Service System Washington D C
- M Times, New York.—Medical Times The Journal of the American Medical Profession 95 Nassau St New York 7 (Continuation of M Times & Long Island M J)
- M Woman's J.—Medical Woman's Journal 528 Walnut St Cincinnati 2 Ohio
- Maandschr v kindergeneesk.—Maandschrift voor kindergeneeskunde M Gorter Rijnburgerweg 161, Leiden
- McGill M J.—McGill Medical Journal The Official Publication of the McGill Medical Society Medical Bldg McGill University Montreal
- Manitoba M Rev.—The Manitoba Medical Review 102 Medical Arts Bldg Winnipeg Canada (Continuation of Manitoba M A Rev)
- Manpower.—Manpower (Volkskracht) A Bi Annual Scientific Journal Devoted to Manpower Research Librarian Dept of Union Education Pretoria Union of South Africa
- Marquette M. Rev.—The Marquette Medical Review Marquette University School of Medicine 561 N 15th St Milwaukee 3
- Med cir farm.—Medicina-cirurgia farmacia Caixa Postal 2923 Rio de Janeiro (Continuation of Med cir pharm)
- Med cir pharm.—Continued as Med cir farm.
- Med clin, Barcelona.—Medicina clínica Órgano de la Facultad de medicina hospitales y sociedades médicas de Barcelona E Granados 121 Barcelona
- Med colon, Madrid.—La medicina colonial Órgano de informacion del Instituto español de medicina colonial (patrocinada por la dirección general de Marruecos y colonias) Av del Generalísimo 5 Madrid
- Med depor y trab.—Medicina del deporte y del trabajo Arenales 981 Buenos Aires
- Med. españ.—Medicina española G V Fernando el Católico 27 Pral Valencia
- Med internaz.—La medicina internazionale Rivista di medicina chirurgia e farmacologia scientifica e letteraria Via G Pr na N 7 Milano
- Med Klin.—Medizinische Klinik Urban & Schwarzenberg Friedrichstrasse 105 B Berlin N W 7
- Med d lavoro.—La medicina del lavoro Via S Barnaba 8 Milano 114
- Med rev, Bergen.—Published in Nord med
- Med sper, Arch ital.—Medicina sperimentale Archivio italiano Corso Raffaello 30 Torino (Continuation of Arch ital di med sper)
- Med. sper Arch ital, Monografie.—(Listed under Books)
- Med Today & Tomorrow.—Medicine Today and Tomorrow 176 New Rd Richmond Surrey
- Méd trop.—Médecine tropicale Revue du Corps de santé colonial Ecole d'application du Service de santé des troupes coloniales Marseille
- Med zhur.—Medichmy zhurnal Kiev Ukraine

- Médecine** *La médecine* Including *Supplément* 1 rue Cassini, Paris 14<sup>e</sup> (Temporarily suspended)
- Médica, Matanzas** *Médica* Órgano oficial de la Sociedad de medicina y cirugía de Matanzas Byrne 85 Matanzas Cuba
- Medicina, Buenos Aires** *Medicina* Buenos Aires Salta 1043 Buenos Aires
- Medicina, Madrid** *Medicina* Revista mensual de ciencias médicas Ayala, 27 (moderno) Madrid
- Medicina, México** *Medicina* Revista mexicana Av Yucatán 29 México D F
- Medicine—Medicine** *Analytical Reviews of General Medicine* Neurology and Pediatrics Williams & Wilkins Co Mt Royal and Guilford Aves, Baltimore 2
- Mem Acad de chir** *Mémoires de l'Académie de chirurgie* Masson & Cie 120 Boulevard Saint Germain Paris 6<sup>e</sup> (Continuation of Bull et mém Soc nat de chir)
- Mem Acad roy méd Belgique** *Mémoires Académie royale de médecine de Belgique* Imprimerie médicale et scientifique 34 rue Botanique Bruxelles
- Mem Inst Butantan** *Memórias do Instituto Butantan* With English abstracts Caixa Postal 65 São Paulo
- Mem Inst Oswaldo Cruz** *Memórias do Instituto Oswaldo Cruz* Caixa postal 926 Rio de Janeiro
- Mem Ophthalmic Lab, Giza, Rep** *Report of the Memorial Ophthalmic Laboratory* Giza Schindler & Ires Cairo
- Mém Soc franç d hist méd** *Mémoires de la Société française d'histoire de la médecine et de ses filiales* 66 Boulevard Raspail Paris 6<sup>e</sup> (Continuation of Bull Soc franç d hist de la méd)
- Memphis M J** *Memphis Medical Journal* 1024 Madison Ave Memphis Tenn
- Ment Health** *Mental Health* 24 Buckingham Palace Road London SW 1 (Continuation of *Ment Welfare*)
- Ment Hyg** *Mental Hygiene* National Committee for Mental Hygiene Inc 372 374 Broadway Albany N Y
- Middlesex Hosp J** *The Middlesex Hospital Journal* Middlesex Hospital Mortimer St London W 1
- Mil Surgeon** *Military Surgeon* 7th and Independence Ave SW Washington 25 D C
- Milbank Mem Fund Quart** *The Milbank Memorial Fund Quarterly* 40 Wall St New York 5
- Minerva med** *Minerva medica* Casella Postale 491 Torino
- Minnesota Med** *Minnesota Medicine* 2642 University Ave St Paul 4
- Mision estud pat reg argent** See Univ Buenos Aires *Misión estud pat reg argent*
- Mississippi Doctor** *The Mississippi Doctor* Booneville Miss
- Mississippi Valley M J** *Mississippi Valley Medical Journal* (Incorporating the Radiologic Review) P O Drawer 110 Quincy Ill (Continuation of *Radiol Rev* & *Mississippi Valley M J*)
- Mitt a d Geb d Lebensmittelunt u Hyg** —*Mitteilungen aus dem Gebiete der Lebensmitteluntersuchung und Hygiene* (Travaux de chimie alimentaire et d'hygiène) Zimmermann & Cie Bern
- Mod Concepts Cardiovas Dis** —*Modern Concepts of Cardiovascular Disease* American Heart Association 1700 Broadway at 58th St New York 19
- Mod Hosp** *Modern Hospital* 919 N Michigan Ave Chicago 11
- Monatschr f Geburtsh u Gynak** —Continued as *Gynaecologia*
- Monatschr f Krebsbekampf** —*Monatsschrift für Krebsbekämpfung* J F Lehmanns Verlag Paul Heystrasse 26, München 15

- Monatschr f Ohrenh.—Monatsschrift für Ohrenheilkunde und Laryngo Rhinologie  
Jrhr. n. 2. c. k.
- ..... für Psychiatrie und Neurologie
- Monatschr f Unfallh.—Monatsschrift für Unfallchirurgie und Versicherungsmedizin  
Springer Verlag OHG, Mölkerbastei 5 Wien I
- Monde med., Paris.—Le monde médical Revista internacional de medicina y terapéutica (Spanish edition) Calle Balma 209-211 Barcelona Casilla 8 Sucursal 5 (Caballito) Buenos Aires
- Month Bull Min Health & Emerg Pub Health Lab Serv Monthly Bulletin of the Ministry of Health and the Emergency Public Health Laboratory Service Directed by the Medical Research Council London
- Month Rev., New York State Dept of Labor.—Monthly Review of the Division of Industrial Hygiene & Safety Standards New York State Department of Labor 80 Centre St New York 13
- München med Wchnschr.—Münchener medizinische Wochenschrift J F Lehmanns Verlag Paul Heysestrasse 26 München 15
- Nat Inst Health Bull.—National Institute of Health Bulletin (Continuation of Hygiene Laboratory Bulletin Series) Federal Security Agency U S Public Health Service Washington D C (Listed under Books)
- Nat Tuberc A Tr.—National Tuberculosis Association Transactions 1790 Broadway New York 19
- Nature London.—Nature weekly illustrated journal of science Macmillan & Co Ltd St Martin's St London WC 2
- Nebraska M J.—Nebraska State Medical Journal Nebraska State Medical Association 416 Federal Securities Bldg Lincoln Neb
- Nederl tijdschr v geneesk.—Nederlandsch tijdschrift voor geneeskunde Jan Luyken straat 5 Amsterdam Zuid
- Nederl tijdschr verlosk en gynae.—Nederlandsch tijdschrift voor verloskunde en gynaecologie de Erven F Bohn Frankestraat 42 Haarlem Netherlands
- Nerv Child.—The Nervous Child Child Care Publications Mt Royal and Guilford Ave Baltimore 2
- Nervenarzt.—Der Nervenarzt Springer Verlag OHG Mölkerbastei 5 Wien I
- Neurobiologia.—Neurobiologia Caixa Postal 651 Recife Pernambuco Brasil
- Nevropat. psikiat.—Nevropatologiya i psikiatriya Orlovsk per 3 Moskva
- New England J Med.—New England Journal of Medicine Published by the Massachusetts Medical Society 8 The Fenway Boston 15 (Continuation of Boston M & S J)
- New Orleans M & S J.—New Orleans Medical and Surgical Journal 1430 Tulane Ave New Orleans 13
- New York M Coll & Flower Hosp Bull.—Continued as Bull New York M Coll Flower & Fifth Ave Hosps
- New York Med.—New York Medicine The Official Publication of the Medical Society of the County of New York 2 East 103rd St New York 29
- New York State J Med.—New York State Journal of Medicine 292 Madison Ave New York 17
- New Zealand M J.—The New Zealand Medical Journal Box 156 Wellington N Z
- Newcastle M J.—The Newcastle Medical Journal Andrew Reid & Co Ltd Newcastle upon Tyne England
- Nord hyg tidskr.—Nordisk hygienisk tidskrift Ejnar Munksgaards Boghandel Nørregade 6 København K



- Nord med**—Nordisk medicin [Including Høstvitidende, Finska Läkarsällskapet handlingar Dunderum Norsk magasin for Lægevidenskaben, Medicinsk revue Hygiea Svenska Läkarsällskapet's förhandlingar, Nordisk medicinsk tidkrift.] Vårnargatan 6 Stockholm
- Nord med tidskr** Published in Nord med
- Norsk mag f lægevidensk** Published in Nord med
- North Carolina M J** North Carolina Medical Journal 300 S Hawthorne Rd., Winston-Salem 7
- North New York M Ann** Continued as North New York M J
- North New York M J** Northern New York Medical Journal 723 Washington St., Watertown N Y (Continuation of North New York M Ann)
- Northwest Med** Northwest Medicine Published by the State Medical Association of Oregon Washington Idaho and Alaska 225 Colb Eidge, Seattle 1, Wash
- Nourrisson** Le nourrisson Revue d'hygiène et de pathologie de la première enfance J B Baillière et Fils 19 rue Hautefeuille Paris 6<sup>e</sup>
- Nova Scotia M Bull** The Nova Scotia Medical Bulletin Official Organ of the Medical Society of Nova Scotia Canadian Medical Association Nova Scotia Division The Imperial Publishing Co Ltd Halifax
- Nutrition Abstr & Rev** Nutrition Abstracts and Reviews The Imperial Bureau of Animal Nutrition Read Library Rowett Institute Bucksburn Aberdeen Scotland
- Nutrition Rev** Nutrition Reviews Nutrition Foundation Inc, Chrysler Bldg, New York 17
- Obst y ginec latino-am** Obstetrics y ginecología Latino-americanas Calle José E Urriburu 1578 Buenos Aires
- Obst & Gynec Surv** Obstetrical and Gynecological Survey Williams & Wilkins Co., Mount Royal and Guilford Aves Baltimore 2
- Occup Med** Occupational Medicine American Medical Association 535 N Dearborn St Chicago 10
- Occup Therapy** Occupational Therapy and Rehabilitation Williams & Wilkins Co., Mt Royal and Guilford Aves Baltimore 2
- Oftal zhur** Oftalmologicheskii zhurnal Proletarskii Bulvar 49 51 Oleska
- Ohio State M J** Ohio State Medical Journal 79 E State St, Columbus 15
- Omnia med**—Omnia medica Via S Michele degli Scalzi 59, Pisa
- Ophth ibero am**—Ophthalmologia ibero americana Calle Florida 229, Buenos Aires [With English translations]
- Ophth Lit** Ophthalmic Literature 24 27 Thayer St, London W 1
- Ophthalmologica** Ophthalmologica S Karger Holbeinstrasse 22 Basel (Continuation of Zeitschr f Augenh)
- Orvosok lapja** Orvosok lapja Nádor utca 32 Budapest 5
- Oto-rhino-laryng internat** 1 oto-rhino-laryngologie internationale Librairie Arnette, 2 rue Casimir Delavigne Paris
- Oto-rino-laring ital**—L oto-rino-laringologia italiana L Cappelli Via Farini, 6, Bologna
- Papers & Disc Ann Cong M Educ**—Papers and Discussions Presented at the Annual Congress on Medical Education and Licensure American Medical Association, 535 N Dearborn St Chicago 10 (Continuation of Proc Ann Cong M Educ)
- Parasitology**—Parasitology Cambridge University Press, Bentley House 200 Euston Rd London, N W 1 (American agent—University of Chicago Press 58th St and Ellis Ave Chicago)
- Paris méd**—Paris médical J B Baillière & Fils 19 rue Hautefeuille Paris 6<sup>e</sup>

- Pasow-Schaefer** Beitr z prakt u theoret Hals-,Nasen- u Ohrenh Sec Pract oto-rhino laryng
- Pasteur**—Pasteur Revista mensual de medicina Organó oficial de la Asociación médica franco-mexicana Apartado Postal 2813 México, D F
- Pathologica**.—Pathologica, rivista mensile Casella Postale N 884 Genova
- Pedagog Semin. & J Genet. Psychol** Sec J Genet Psychol
- Pediat, akush i ginek**—Pediatriya akusherstvo i ginekologiya Reytarska No 22, Kiev
- Pediat Americas**—Pediatria de las Américas Ponciano Arriaga 6-2, México, D F
- Pediat med prat**—La pediatria del medico pratico Via Martiri della Libertà, n 15 Torino
- Pediat prat, São Paulo**—Pediatria prática Revista bimestral de clinica infantil e puericultura Caixa Postal 2026, São Paulo
- Pediat e puericult, Bahia**—Pediatria e puericultura Instituto Arnaldo B Marques Avenida Joana Angelica, Bahia
- Pediatria**—La pediatria Rivista mensile di medicina e di chirurgia dell'infanzia S Andrea delle Dame, 4, Napoli
- Pediatriya**—Pediatriya Orlikov per 3, Moskva
- Pennsylvania M J**—Pennsylvania Medical Journal 230 State St, Harrisburg
- Permanente Found M Bull**—Permanent Foundation Medical Bulletin 280 W Mac Arthur Blvd, Oakland Calif
- Pflüger's Arch f d ges Physiol** Sec Arch f d ges Physiol
- Philippine J Surg**—Philippine Journal of Surgery Philippine General Hospital, Manila, Philippines
- Physiol Rev**—Physiological Reviews American Physiological Society Secretary of Publications, 19 W Chase St, Baltimore 1
- Physiol Zool**—Physiological Zoology University of Chicago Press, 58th St and Ellis Ave, Chicago
- Physiotherapy Rev**—The Physiotherapy Review American Physiotherapy Association 720 N Michigan Ave, Chicago 11
- Plast & Reconstruct Surg**—Plastic and Reconstructive Surgery The Williams & Wilkins Co, Mount Royal & Guilford Aves Baltimore 2 Md
- Policlínico (sez chir)**—Il Policlínico (sezione chirurgica) (sez med)—Il Policlínico (sezione medica) (sez prat)—Il Policlínico (sezione pratica) Via Sistina N 14 Roma
- Polski tygodnik lek**—Polski tygodnik lekarski Ul Chocimska 24, Warszawa
- Portland Clin Bull**—The Portland Clinic Bulletin 1216 S W Yamhill St Portland 5 Ore
- Portugal med**—Portugal médico Rua Cândido dos Reis 47 Porto Portugal
- Post Grad M J**—The Post Graduate Medical Journal 1, Wimpole St London W 1
- Postgrad Med**—Postgraduate Medicine Official Journal of the Interstate Postgraduate Medical Association 512 Essex Bldg Minneapolis 3 (Continuation of Proc Interst Postgrad M A North America)
- Prensa med argent**—La prensa médica argentina Junín 845 Buenos Aires
- Prensa med mex**—La prensa médica mexicana Queretaro 97, México, D F
- Prescriber**—Prescriber 3 Howe St Edinburgh 3

- Nord med** —Nordisk medicin [Including Hospitaltidende Fr handlingar Thordetum Norsk magasin for lægevidensk Hygiea Svenska Blarvällskapet's förhandlingar, Nor Våpnargatan 6 Stockholm
- Nord med tidskr** —Published in Nord. med
- Norsk mag f lægevidensk** —Published in Nord. med.
- North Carolina M J** —North Carolina Medical Journal Salem 7
- North New York M. Ann** —Continued as North
- North New York M J** —Northern New York Watertown N Y (Continuation of N
- Northwest Med** —Northwest Medicine J Oregon Washington Idaho and
- Nourrison** —Le nourrison Revue d J B Baillière et Fils 19 rue J
- Nova Scotia M Bull** —The Nova Society of Nova Scotia C Imperial Publishing Co
- Nutrition Abstr & Rev** —  
Animal Nutrition J
- Nutrition Rev** —Nutr  
York 17
- Obst & gynecolatin** —Proceedings of the Royal Society, series B (Black  
Lithium 17  
ge University Press Bentley House London N W 1
- Obst & Gynec** —Proceedings of the Royal Society of Medicine Longmans Green &  
Moit  
Intermaster Row 43 Albert Drive London S W 19
- Occup Med** —Proceedings of the Society for Experimental Biology and  
St  
er Biol & Med  
ne The Griffiths Press, 100 Liberty St Utica N Y
- Occup f** —Proceedings of the Staff Meetings of the Clinic  
J  
The Clin, Honolulu  
Honolulu 841 Young St Honolulu
- Staff Meet, Mayo Clin** —Proceedings of the Staff Meetings of the Mayo Clinic  
Rochester Minn
- Progr med, Napoli** —Il progresso medico Galleria Umberto I 83 Napoli
- Progr méd, Paris** —Le progrès médical 8 rue Perronet Paris 7
- Prophylax antiven** —La prophylaxie antivenérienne 25 Boulevard Saint Jacques  
Paris 14
- Psychiat en neurol bl** —Psychiatrische en neurologische bladen uitgegeven door de  
nederlandsche vereeniging voor psychiatrie en neurologie F van Rossum Am  
sterdam
- Psychiat neurol Wchnschr** —Psychiatrisch neurologische Wochenschrift Carl Marhold  
Henricienstrasse 3 Halle Germany
- Psychiatric Quart** —Psychiatric Quarterly Utica State Hospital Utica N Y
- Psychiatry** —Psychiatry Journal of the Biology and the Pathology of Interpersonal  
Relations William Minson White Psychiatric Foundation 1711 Rhode Island  
Ave N W Washington 6 D C
- Psychoanalyt Quart** —Psychoanalytic Quarterly 372-374 Broadway Albany
- Psychoanalyt Rev** —Psychoanalytic Review 70 Pine St, New York 5
- Psychol Monogr** —Psychological Monographs Psychological Review Co, Princeton  
N J (Listed under Books)

- Psychol Praxis** — *Psychologische Praxis* S. Karger, Hofheimstrasse 22, Basel, 215 Fourth Ave., New York 3
- Psychol Rev** — *Psychological Review* The American Psychological Association, Inc., Massachusetts and Nebraska Aves, Washington 16 D C
- Psychosom Med** — *Psychosomatic Medicine* The American Society for Research in Psychosomatic Problems, Inc., 714 Madison Ave., New York 21
- Psychosom Med**, Monographic Series — (Listed under Books)
- Pub Health** — *Public Health* Society of Medical Officers of Health Tavistock House, South Tavistock Sq., London, W C 1.
- Pub Health Bull** — *Public Health Bulletin* Washington D C (Listed under Books)
- Pub Health Nursing** — *Public Health Nursing* 1790 Broadway, New York 29
- Pub Health Rep** — *Public Health Reports* Superintendent of Documents, Government Printing Office, Washington, D C
- Pub Health Rep Supp** — *Public Health Reports Supplements* Washington D C (Listed under Books)
- Publ méd, São Paulo** — *Publicações médicas* Caixa Postal 95 II, São Paulo
- Puerto Rico J. Pub Health & Trop Med** — *Puerto Rico Journal of Public Health and Tropical Medicine* (With Spanish translations) Columbia University Press, 2960 Broadway, New York 27
- Quaderni Clin ostet e ginec** — *Quaderni di Clinica ostetrica e ginecologica* S. Biagio 4, Parma
- Quaderni radiol** — *Quaderni di radiologia* Rivista di collaborazione clinico-radiologica, Via Simon da Cuneo, Belluno, Italia
- Quart Bull Health Organ, League of Nations** — Continued as *Bull Health Organ, League of Nations*
- Quart Bull Indiana Univ M Center** — *Quarterly Bulletin Indiana University Medical Center* 1040 W Michigan St., Indianapolis
- Quart Bull Northwestern Univ M School** — *Quarterly Bulletin Northwestern University Medical School* 303 E Chicago Ave., Chicago
- Quart Bull, Sea View Hosp** — *The Quarterly Bulletin of Sea View Hospital* Sea View Hospital, Staten Island N Y
- Quart J Exper. Physiol.** — *Quarterly Journal of Experimental Physiology and Cognate Medical Sciences* Charles Griffin & Co., Ltd., 42 Drury Lane, London W C 2
- Quart J Med** — *Quarterly Journal of Medicine* 123 Woodstock Pk., London W 11
- Quart J Pharm & Pharmacol** — *Quarterly Journal of Pharmacy and Pharmacology* The Pharmaceutical Press, 17, Bedford Square, London W C 1
- Quart J Pharm & Allied Sci** — *Quarterly Journal of Pharmacy and Allied Sciences* The Pharmaceutical Press, 17, Bedford Square, London W C 1
- Quart J Speech** — *The Quarterly Journal of Speech* Official Publication of the National Association of Teachers of Speech, Wayne University, Detroit
- Quart J Stud on Alcohol** — *Quarterly Journal of Studies on Alcohol* 4 Hillhouse Ave., New Haven
- Quart Rev Biol.** — *Quarterly Review of Biology* Williams & Wilkins Co., Mt Royal and Guilford Aves., Baltimore 2
- Quart Rev Obst & Gynec** — *Quarterly Review of Obstetrics and Gynecology* Washington Institute of Medicine, 1720 M St. N W, Washington 6 D C
- Quart Rev Psychiat & Neurol** — *Quarterly Review of Psychiatry and Neurology* Washington Institute of Medicine, 1720 M St. N W, Washington 6, D C
- Radiog & Clin Photog** — Continued as *M Radiog & Photog*

- Radiography** —*Radiography* The Society of Radiographers 32 Welbeck St., London W 1
- Radiol med** —*La radiologia medica, rivista mensile* L. Zerboni, Via C. Poerio 13 Milano 120
- Radiol prat** —*Radiologie pratique* 13 rue Puits Gaillet Lyon
- Radiologia** —*Radiologia* Abuna 3117 Buenos Aires
- Radiology** —*Radiology* A Monthly Journal Devoted to Clinical Radiology and Allied Sciences Radiological Society of North America 607 Medical Arts Bldg Syracuse 2
- Rassegna di fisiopat clin e terap** —*Rassegna di fisiopatologia clinica e terapeutica* Casella postale 21 Pisa (Continuation of *Rassegna di terap e pat clin*)
- Rassegna internaz clin e terap** —*Rassegna internazionale di clinica e terapia* Via S Sebastiano 65 Napoli 173
- Rassegna ital d'ottal** —*Rassegna italiana d'ottalmologia* Rosenberg & Sellier Via Andrea Doria 14 Torino
- Rassegna med** —*Rassegna medica* Via Carlo Tenca 32-34 Milano
- Rassegna di med indust** —*Rassegna di medicina industriale* Via Mario Giorda 2, Torino (Continuation of *Rassegna di med appl lavoro indust*)
- Rassegna med sarda** —*Rassegna medica sarda* Istituto anatomico della Università Via Genova 1 149 Cagliari
- Rassegna di studi psichiat** —*Rassegna di studi psichiatrici* Tip S Bernardino Via Paolo Mascagni 33 Siena
- Recenti progr med** —*Recenti progressi in medicina* Via Aterno 8 Roma
- Research Publ, A Nerv. & Ment Dis** See *A Research Nerv. & Ment Dis. Proc.*
- Research Quart** —*The Research Quarterly* Published by the American Association for Health Physical Education and Recreation 1201 16th St N W Washington 6 D C
- Resenha clin-cient** —*Resenha clinico-científica* Rua Conselheiro Brotero 1263 São Paulo
- Rev argent de cardiol** —*Revista argentina de cardiología* Larrea 1132 Buenos Aires
- Rev argent dermatosif** —*Revista argentina de dermatosifilología* El Ateneo Córdoba 2022 Buenos Aires
- Rev argent hist med** —*Revista argentina de historia de la medicina* Órgano oficial del ateneo de historia de la medicina Echeverría 1606 Buenos Aires
- Rev argent de neurol y psiquiat** —*Revista argentina de neurología y psiquiatría* Sala 3 Hospital Nacional del Centenario Rotario de Santa Fe
- Rev argent-norteam cien méd** —*Revista argentino-norteamericana de ciencias médicas* [With English abstracts] Ayacucho 576 Buenos Aires
- Rev. argent de reumatol** —*Revista argentina de reumatología* Victoria 4177 Buenos Aires
- Rev argent de tuberc.** —*Revista argentina de tuberculosis* Santa Fe 4292 Buenos Aires
- Rev argent de urol** —*Revista argentina de urología* Chartas 1358 Buenos Aires
- Rev Asoc argent. dietol** —*Revista de la Asociación argentina de dietología* Calle Pueyrredón 2423 Buenos Aires
- Rev Asoc méd argent** —*Revista de la Asociación médica argentina* Calle Santa Fe 1171 Buenos Aires
- Rev Asoc paulista de med** —Continued as *Rev paulista de med*
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- Sovet med** Sovetskaya medicina Rakhimovskiy per 3 Moskva
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- West J Surg — The Western Journal of Surgery, Obstetrics and Gynecology Fifth Ave Portland 4 Ore
- West Virginia M J — West Virginia Medical Journal 302 Atlas Bldg. ■

- Wien Arch f inn Med — Wiener Archiv für innere Medizin und deren Grenzgebiete Urban & Schwarzenberg Wien, 71
- Wien klin Wchnschr — Wiener klinische Wochenschrift Springer-Verlag Mölkerbastei 5, Wien, 1
- Wien med Wchnschr — Wiener medizinische Wochenschrift Steingasse 25 Wien 3
- Wisconsin M J — Wisconsin Medical Journal 917 Tenney Bldg Madison Wis
- Yale J Biol & Med — Yale Journal of Biology and Medicine 333 Cedar St New Haven
- Zentralbl f allg Path u path Anat — Zentralblatt für allgemeine Pathologie und pathologische Anatomie Gustav Fischer Jena
- Zentralbl f Bakt — Zentralblatt für Bakteriologie Parantienkunde und infektionskrankheiten (Abteilungen 1 und 2) Gustav Fischer Jena (Continuation of Zentralbl f Bakt)
- Zentralbl f d ges. Tuberk Forsch — Zentralblatt für die gesamte Tuberkuloseforschung Springer Verlag OHG Mölkerbastei 5 Wien I
- Zentralbl f Gewerbehyg — Zentralblatt für Gewerbehygiene und Unfallverhütung Springer Verlag OHG Mölkerbastei 5 Wien I
- Ztschr f Biol — Zeitschrift für Biologie J F Lehmanns Verlag Paul Heyerstrasse 26 München 15
- Ztschr f d ges. exper Med — Zeitschrift für die gesamte experimentelle Medizin Springer Verlag Neuenheimer Landstrasse 24 Heidelberg
- Ztschr f d ges. Krankenhausw — Zeitschrift für das gesamte Krankenhauswesen Springer Verlag OHG Mölkerbastei 5 Wien I
- Ztschr f Hyg u Infektionskr — Zeitschrift für Hygiene und Infektionskrankheiten Springer Verlag Neuenheimer Landstrasse 24 Heidelberg
- Ztschr f Immunitätsforsch u exper Therap — Zeitschrift für Immunitätsforschung und experimentelle Therapie Gustav Fischer Jena
- Ztschr f Infektionskr — Zeitschrift für Infektionskrankheiten parasitäre Krankheiten und Hygiene der Haustiere Richard Schoetz Wilhelmstrasse 125 Berlin S W 68
- Ztschr f Kinderh — Zeitschrift für Kinderheilkunde Springer Verlag OHG Mölkerbastei 5 Wien I
- Ztschr f Kinderpsychiat — Zeitschrift für Kinderpsychiatrie (Journal de psychiatrie infantile) Benno Schwabe & Co Klosterberg 27 Basel 10
- Ztschr f Krebsforsch — Zeitschrift für Krebsforschung Springer Verlag OHG Mölkerbastei 5 Wien I
- Ztschr f Kruppelfürsorge — Zeitschrift für Kruppelfürsorge Johann Ambrosius Barth Salomonstrasse 18 B Leipzig C 1
- Ztschr f Orthop — Zeitschrift für Orthopädie und ihre Grenzgebiete Ferdinand Enke Verlag Hasenbergsteige 3 Stuttgart W (Continuation of Ztschr f orthop Chir)
- Ztschr f physiol Chem — Hoppe-Seyler's Zeitschrift für physiologische Chemie Walter de Gruyter & Co Woynschstrasse 13 Berlin W 35
- Ztschr f Psychol — Zeitschrift für Psychologie Johann Ambrosius Barth Salomonstrasse 18 B Leipzig C 1
- Ztschr f Stomatol — Zeitschrift für Stomatologie Urban & Schwarzenberg Wien 71
- Ztschr f Vitaminforsch — Zeitschrift für Vitaminforschung zugleich Zentralblatt für Vitaminologie und verwandte Ernährungsprobleme Hans Huber, Bern 16

## II PERIODICALS NOT INDEXED

The following list includes the names of periodicals not regularly indexed in the *Quarterly Cumulative Index Medicus*. Some of these periodicals have been discontinued, and some, while not strictly medical, treat of sciences closely related to medicine. In addition there are periodicals such as the house organs of pharmaceutical manufacturers or concerns selling medical supplies. Periodicals marked with an asterisk are indexed occasionally.

- Acad nat curios ephemer* — *Academiae Caesaris Leopoldinae naturae curiosorum ephemerides* Frankfurt, Germany
- Acta med* — *Acta médica* Buenos Aires Argentina
- Acta Acad nat curios* — *Acta physico-medica Academiae Caesaris naturae curiosorum exhibentia ephemerides* Norimberg Germany
- \**Acta clin belg* — *Acta clinica belgica* Hôpital Universitaire Saint Pierre rue Haute, Bruxelles
- Acta helvet* — *Acta helvetica physico-mathematico-botanico medica* Basel Switzerland
- \**Acta odont Scandinav* — *Acta odontologica Scandinavica* P A Nordedt & Soner Tryckerigatan 2, Stockholm
- \**Acta oto-laryng orient* — *Acta oto-laryngologica orientalis* P O B 422 Jerusalem
- Actas de la primera conf latino am de neurol, psiquiat y med leg* — *Actas de la primera conferencia latino americana de neurología (psiquiatría) y medicina legal* Buenos Aires, Argentina
- Actinoterapia* — *Actinoterapia rivista internazionale di terapia dei raggi sostanze radioattive* Naples
- Actualite méd* — *Actualité médicale* Paris
- Aerztl Ber d k k. allg Krankenh zu Wien* — *Aerztliche Berichte des k. u. k. allgemeinen Krankenhauses zu Wien* Vienna
- Aerztl Cor -Bl f Bohmen* — *Aerztliches Correspondenzblatt für Böhmen* Prague, Czechoslovakia [Continued as *Jrag med Wchnschr*]
- Aerztl Praxis* — *Die ärztliche Praxis* Vienna
- Aerztl Rundschau* — *Aerztliche Rundschau* Munich Germany
- Aerztl Sachverst -Ztg* — *Aerztliche Sachverständigen Zeitung* Berlin
- Aerztl Vereinsbl f Deutschland* — *Aerztliches Vereinsblatt für Deutschland* Leipzig
- \**Afrique franç chir* — *L'Afrique française chirurgicale* 3 rue Pélassier, Alger
- Air Surgeon's Bull* — *Air Surgeon's Bulletin* Washington D C [Ceased publication]
- \**Akad latr* — *Akadimiki Iatriki* 70 Patission St Athens
- \**Alexander Blain Hosp Bull* — *Alexander Blain Hospital Bulletin* 2291 Jefferson Ave, E Detroit
- \**Algérie-med* — *L'Algérie médicale* 3 rue Pélassier Alger
- Alienist & Neurol* — *Alienist and Neurologist* St Louis
- Alkoholfrage* — *Die Alkoholfrage* Berlin
- Allg balneol.Ztg* — *Allgemeine balneologische Zeitung* Prague, Czechoslovakia
- Allg med Centr -Ztg* — *Allgemeine medizinische Central Zeitung* Berlin
- Allg med Ztg* — *Allgemeine medizinische Zeitung mit Berücksichtigung des Neuesten und Interessantesten der allgemeinen Naturkunde* Altenburg Germany
- Allg mil -arztl Ztg* — *Allgemeine militär-ärztliche Zeitung* Vienna
- Allg statist Arch* — *Allgemeines statistisches Archiv* Jena Germany
- Allg Wien med Ztg* — *Allgemeine Wiener medizinische Zeitung* Vienna



- Allg Ztg f Chir** —Allgemeine Zeitung für Chirurgie, innere Heilkunde und ihre Hülfswissenschaften Augsburg Germany
- Allg.Ztg f Mil-Aerzte** —Allgemeine Zeitung für Militair Aerzte Brunswick, Germany
- Allm.svenska läk-tidning** —Allmänna svenska läkartidningar Stockholm Sweden
- Am Ann Deaf** —American Annals of the Deaf Washington D C
- Am Anthropol** —American Anthropologist Washington D C
- Am Chem J** —American Chemical Journal Baltimore [Merged in J Am Chem Soc]
- \*Am Diabetes A, Proc** —See Proc Am Diabetes A
- Am Druggist** —American Druggist New York
- Am J Cancer** —American Journal of Cancer New York [Ceased publication]
- Am J Care Cripples** —American Journal of Care for Cripples New York
- Am J Electroth & Radiol** —American Journal of Electrotherapeutics and Radiology New York [Continued as Physical Therap]
- Am J Insan** —American Journal of Insanity Utica N Y [Continued as Am J Psychiat]
- Am J M Jurisp** —The American Journal of Medical Jurisprudence Boston [Ceased publication]
- Am J M Sc** —American Journal of the Medical Sciences Philadelphia
- Am J Physiol Optics** —American Journal of Physiological Optics Southbridge Mass
- Am J Police Sc** —American Journal of Police Science Chicago
- Am J Psychiat** —American Journal of Psychiatry Baltimore
- Am J School Hyg** —American Journal of School Hygiene Worcester Mass
- Am M Times** —American Medical Times New York
- Am M Recorder** —American Medical Recorder Philadelphia [Merged in Am J M Sc]
- Am Med** —American Medicine New York
- Am Physician** —American Physician Rahway N J [Merged with M Counselor]
- \*An Acad med Medellín** —Anales de la Academia de medicina de Medellín Bedout Medellín
- An Asoc quím argent** —Anales de la Asociación química argentina Buenos Aires
- \*An Cáted de pat y clín tuberc** —Anales de la Cátedra de patología y clínica de la tuberculosis Avenida Vélez Sarsfield 405 Buenos Aires
- An de cien méd** —Anales de ciencias médicas Madrid
- \*An Fac med Bahia** —Anas da Faculdade de medicina da Bahia Salvador Bahia Brazil
- An de hig pub** —Anales de higiene pública y medicina legal Buenos Aires Argentina
- An Hosp de Santa Cruz y San Pablo** —Anales del Hospital de la Santa Cruz y San Pablo Barcelona Spain
- \*An d Inst med exper Valencia** —Anales del Instituto de medicina experimental de Valencia Valencia España
- \*An Inst med trop** —Anais do Instituto de medicina tropical Lisboa Portugal
- \*An Inst modelo de clín méd** —Anales del Instituto modelo de clinica médica Universidad de Buenos Aires Buenos Aires
- \*An med Barcelona** —Anales de medicina Boletín mensual de la Academia de ciencias médicas segunda época Via Layetana 31 Barcelona
- \*An méd Concepción** —Anales médicos de Concepción Sociedad médica de Concepción Casilla 33 Concepción Chile
- \*An neuro-psiquiat d Frenocom mujeres Bogotá** —Anales neuro-psiquiatricos del Frenocomio de mujeres de Bogotá Calle 5° No 12 A 25 Bogotá

- An de ofst. — *Anales de oftalmología* Mexico, D F
- An r Acad. de méd — *Anales de la real Academia de medicina* Madrid
- An. Soc. ginec españ — *Anales de la Sociedad ginecológica española* Madrid
- Anat. Hefte — *Anatomische Hefte* Referate und Beiträge zur Anatomie und Entwicklungsgeschichte. Erste Abteilung: Arbeiten aus anatomischen Instituten Wiesbaden, Germany [See also *Ergebn d Anat u Entwicklungsgeoch*]
- \*Ann Am. Acad Polit & Social Sc — *Annals of the American Academy of Political and Social Science* 3457 Walnut St., Philadelphia 4
- Ann Applied Biol — *Annals of Applied Biology* London
- Ann d Chem — *Annalen der Chemie* (Liebig's) Leipzig
- Ann de chim — *Annales de chimie, ou recueil de mémoires concernant la chimie et les arts qui en dépendent* Paris [Continued as *Ann de chim et phys*]
- Ann de chim et phys — *Annales de chimie et de physique* Paris
- Ann Clin Med — *Annals of Clinical Medicine* Baltimore [Continued as *Ann Int Med*]
- Ann di clin med — *Annali di clinica medica* Palermo Italy
- Ann clin de Montpellier — *Annales cliniques de Montpellier* Montpellier, France
- Ann Distinguished Serv Found Optom — *Annals of the Distinguished Service Foundation of Optometry* Cambridge Mass
- \*Ann Fac med e chir, Bari — *Annali della Facoltà di medicina e chirurgia R. Università di Bari*, Bari, Italia
- Ann d Geburtsh. — *Annalen der Geburtshilfe überhaupt und der Entbindungsanstalt zu Marburg insbesondere* Leipzig
- Ann f d ges Heilk — *Annalen für die gesammte Heilkunde* Karlsruhe, Germany
- Ann Gynec. & Pediat — *Annals of Gynecology and Pediatrics* Philadelphia Boston
- Ann de gynéc et d'obst — *Annales de gynécologie et d'obstétrique* Paris
- Ann Inst océanograph — *Annales de l'Institut océanographique* Paris
- Ann d Ist Maragliano p la cura d tuberc — *Annali dell Istituto Maragliano per lo studio e la cura della tubercolosi e di altri malattie infettive* Genoa, Italy
- Ann M Hut — Ceased publication
- Ann d mal de la peau — *Annales des maladies de la peau et de la syphilis* Paris
- \*Ann méd - chir de l'Hôp Sainte-Justine, Montreal — *Les annales médico-chirurgicales de l'Hôpital Sainte Justine de Montréal* Hôpital Sainte Justine Montreal
- Ann de méd et chir inf — *Annales de médecine et chirurgie infantiles* Paris
- Ann de méd lég — *Annales de médecine légale de criminologie, et de police scientifique, médecine sociale et toxicologie* Paris
- Ann de méd et de pharm colon — *Annales de médecine et de pharmacie coloniales* Paris
- Ann. méd - psychol — *Annales médico-psychologiques* Paris
- Ann Missouri Botan Garden — *Annals of the Missouri Botanical Garden* St Louis
- Ann di nevrol — *Annali di neurologia* Turin Palermo Italy
- \*Ann New York Acad Sc — *Annals of the New York Academy of Sciences* American Museum of Natural History Central Park West at 79th St New York 24
- Ann Ophth & Otol — *Annals of Ophthalmology and Otology* St Louis
- Ann d Phys u Chem — *Annalen der Physik und Chemie* Leipzig
- Ann Soc belge de méd trop — *Annales de la Société belge de médecine tropicale* Anvers
- Ann Soc d'hydrol méd de Paris — *Annales de la Société d'hydrologie médicale de Paris*
- Anthropologic, Paris. — *L'anthropologie* Paris

**Apoth-Ztg** —Apotheker Zeitung Berlin

**Arb a d Geb d path Anat Inst zu Tübingen** —Arbeiten auf dem Gebiete der pathologischen Anatomie und Bacteriologie aus dem pathologisch anatomischen Institut zu Tübingen Brunswick Germany

**Arb a d k Gendtsamte** —Arbeiten aus dem kaiserlichen Gesundheitsamte Berlin

**Arb a d neurol Inst a d Wien Univ** —Arbeiten aus dem neurologischen Institute (Institut für Anatomie und Physiologie des Centralnervensystems) an der Wiener Universität Vienna

**Arb a d Reichsgndtsamte** —Arbeiten aus dem Reichsgesundheitsamte Berlin

**Arch f Anat** —Archiv für Anatomie Anatomische Abteilung des Archives für Anatomie und Physiologie [Title after 1912 Arch f Anat u Entwicklungsgesch] Leipzig

**Arch de anat** —Arquivo de anatomia e do anthropologia Lisbon Portugal

**Arch f Anat u Physiol** —Archiv für Anatomie und Physiologie Leipzig [Continued as Arch f Anat Physiol u wissensch Med]

**Arch f Anat, Physiol u wissensch Med** —Archiv für Anatomie Physiologie und wissenschaftliche Medizin Leipzig

**Arch f Anthropol** —Archiv für Anthropologie Brunswick Germany

**Arch per l'antropol** —Archivio per l'antropologia e l'etnologia Florence Italy

**\*Arch belges méd, sociale et d hyg** —Archives belges de médecine sociale et d hygiène et revue de pathologie et de physiologie du travail 2 Place Royale Bruxelles

**Arch brasil de psychiat** —Archivos brasileiros de psiquiatria neurologia e ciencias afines Rio de Janeiro

**Arch clin ital** —Archivio clinico italiano Rome

**Arch Diagnosis** —Archives of Diagnosis New York [Ceased publication]

**Arch franç de path gen et exper** —Archives françaises de pathologie générale et expérimentale et d'anatomie pathologique Paris

**Arch f Frauenk u Eugensk** —Archiv für Frauenkunde und Eugenik Würzburg Germany

**Arch gén de chir** —Archives générales de chirurgie Paris

**Arch gen de med** —Archives générales de médecine Paris

**\*Arch ginec y obst** —Archivos de ginecología y obstetricia Organó de la Sociedad ginecotoxológica del Uruguay y de la Seccional de ginecología y obstetricia del H Pereira Rossell Av Garibaldi 2087 Montevideo

**\*Arch Hyg** —Archiv Hygienus Minister of Hygiene Panepistimiou St Athens

**Arch internat de chir** —Archives internationales de chirurgie Ghent Belgium

**Arch internaz di med e chir** —Archivio internazionale di medicina e chirurgia Naples

**Arch ital de biol** —Archives italiennes de biologie Pisa [Ceased publication]

**Arch ital di pediat** —Archivio italiano di pediatria Naples

**Arch ital di sc med colon** —Archivio italiano di scienze mediche coloniale Modena

**Arch d Julius Klaus- Stifg f Vererbgsforsch** —Archiv der Julius Klaus Stiftung für Vererbungsforschung Sozialanthropologie und Rassenhygiene Zurich Switzerland

**Arch f Laryng u Rhin** —Archiv für Laryngologie und Rhinologie Berlin

**Arch de lepra** —Archivos de lepra Bogotá Colombia

**Arch méd -chir de Province** —Archives médico-chirurgicales de Province Tours France [Ceased publication]

**Arch de méd expér et d'anat path** —Archives de médecine expérimentale et anatomie pathologique Paris

- Arch med de Toulouse — Archives médicales de Toulouse Toulouse France  
Arch mens d obst et de gynec — Archives mensuelles d obstétrique et de gynécologie Paris  
\* Arch mex ven y dermat — Archivos mexicanos de venereo y dermatología Organó oficial de la Asociación nacional de venerología Sonora No 136 México D F  
Arch f mikr Anat. — Archiv für mikroskopische Anatomie Bonn Germany  
Arch de neurobiol — Archivos de neurobiología Madrid  
\* Arch neurocir , Buenos Aires — Archivos de neurocirugía Paraguay 2701 Buenos Aires  
Arch de oftal hispano-am. — Archivos de oftalmología hispano-americanos Barcelona Spain  
Arch f Ohrenh. — Archiv für Ohrenheilkunde Leipzig [Continued as Arch f Ohren- u Nasen u Kehlkopf] Biologie  
Arch f Ohren- u Nasen- u Kehlkopf — Archiv für Ohren Nasen und Kehlkopfheilkunde sowie die angrenzenden Gebiete Berlin  
Arch Otol — Archives of Otology New York  
Arch d Pharm — Archiv der Pharmacie Berlin  
Arch f phys-diätet Therap — Archiv für physikalisch diätetische Therapie in der ärztlichen Praxis Berlin  
Arch de physiol norm et path — Archives de physiologie normale et pathologique Paris  
Arch d prakt Heilk — Archiv der praktischen Heilkunde für Schlesien und Sudpreussen Breslau Germany  
A. . . . .  
A. . . . .  
Arch Rio-Grand de med — Archivos Rio Grandenses de medicina Porto Alegre Brazil  
Arch Roentgen Ray — Archives of the Roentgen Ray London [Continued as Arch Rad ol & Electroth]  
Arch d se biol — Archives de sciences biologiques publiées par l'Institut impérial de médecine expérimentale à St Pétersbourg Leningrad  
\* Arch Soc estud clin Habana — Archivos de la Sociedad de estudios clínicos de la Habana Manrana de Gomez No 224 Habana  
Arch f soziale Hyg u Demog — Archiv für soziale Hygiene und Demographie Berlin [Ceased publication]  
Arch. suisses d anthropol gen — Archives suisses d anthropologie générale Geneva Switzerland  
\* Arch urol — Archivio di urologia Istituto Sanatoriale Principi di Piemonte Napoli  
Arch urol de la Clin de Necker — Archives urologiques de la Clin que de Necker Paris  
Arch f wissensch u prakt Thierh — Archiv für wissenschaftliche und praktische Thierheilkunde Berlin  
Arch f Zellforsch — Archiv für Zellforschung Leipzig  
Army & Navy J — Army and Navy Journal Washington D C  
\* Arq brasil neuriat e psiquiat — Arquivos brasileiros de neurologia e psiquiatria Organó oficial da Sociedade de neurologia psiquiatria e medicina legal Rua Ramiro Magalhães 521 Rio de Janeiro  
\* Arq clin — Arquivos de clínica Rua Senador Dantas 20 Rio de Janeiro  
\* Arq Inst Penido Burnier — Arquivos do Instituto Penido Burnier Dr Guedes de Mello Filho Instituto Penido Burnier Campinas Estado de São Paulo  
\* Arq Inst quim biol estad Minas Gerais — Arquivos do Instituto químico-biológico do estado de Minas Gerais Caixa Postal 26 Belo Horizonte

- \**Arq Soc med leg e criminol S Paulo*.—Arquivos da Sociedade de medicina legal e criminologia de S Paulo Caixa Postal 2658 São Paulo
- Ars méd Barcelona*.—*Ars médica*, revista de medicina, cirugía y especialidades Barcelona Spain
- Art méd d'Anvers*.—*L'art médical d'Anvers* Antwerp, Belgium
- Arte ostet*.—*L'arte ostetrica* Giornale per i medici e per le levatrici Milan Italy
- Atlanta J Rec Med*.—*Atlanta Journal Record of Medicine* Atlanta Ga
- Attività med ital*.—*Attività medica italiana* Pisa
- Australasian M Gaz*.—*Australasian Medical Gazette* Sydney Australia [Merged in *Australian M J* forming *M J Australia*]
- Australian M J*.—*Australian Medical Journal* Melbourne [Merged in *Australasian M Gaz* to form *M J Australia*]
- Balneol Centr-Ztg*.—*Balneologische Centralzeitung* Berlin
- Beihfte z Arch f Schiff- u Tropen-Hyg*.—*Beihfte zum Archiv für Schiffs- und Tropen Hygiene* Leipzig
- Beihfte z Ztschr f ang Psychol*.—*Beihfte zur Zeitschrift für angewandte Psychologie und psychologische Sammelersuchung* Leipzig
- Beitr z chem Physiol u Path*.—*Beiträge zur chemischen Physiologie und Pathologie (Hofmeister's)* Zeitschrift für die gesamte Biochemie Brunswick Germany
- Beitr z exper Therap*.—*Beiträge zur experimentellen Therapie* Berlin
- Beitr z Geburtsh u Gynäk*.—*Beiträge zur Geburtshilfe und Gynäkologie* Berlin
- Beitr z Physiol*.—*Beiträge zur Physiologie* Berlin
- Beitr z prakt Augenh*.—*Beiträge zur praktischen Augenheilkunde* Berlin Leipzig
- Beitr z prakt Heilk*.—*Beiträge zur praktischen Heilkunde mit vorzüglicher Berücksichtigung der medicinischen Geographie Topographie und Epidemiologie* Leipzig
- Ber d deutsch chem Gesellsch*.—*Berichte der deutschen chemischen Gesellschaft* Berlin
- Ber d deutsch pharm Gesellsch*.—*Berichte der deutschen pharmaceutischen Gesellschaft* Berlin
- Ber d Gsundhsrath in Zurich*.—*Berichte des Gesundheitsrathes an die hohe Regierung in Zürich* Zurich Switzerland
- Berl klin Wchnschr*.—*Berliner klinische Wochenschrift*
- Berl Klinik*.—*Berliner Klinik* Sammlung klinischer Vorträge
- Berl med Centr-Ztg*.—*Berliner medicinische Central Zeitung* [Continued as *Allg med Centr Ztg*]
- Berl tierärztl Wchnschr*.—*Berliner tierärztliche Wochenschrift*
- Berl zahnärztl Vereinsbl*.—*Berliner zahnärztliches Vereinsblatt*
- Bibliot d ges med Wissensch*.—*Bibliothek der gesamten medicinischen Wissenschaften für praktische Aerzte und Specialärzte* Vienna Leipzig
- Bibliot d prakt Heilk*.—*Bibliothek der praktischen Heilkunde* Jena Germany Berlin
- \**Biokhimiya*.—*Biokhimiya Akademkniga Pushkinskaya* 23 Moskva
- Biol med Milano*.—*Biologie medicale* Milan Italy [Ceased publication]
- Biol Zentralbl*.—*Biologisches Zentralblatt* Leipzig
- Biometrika*.—*Biometrika* Cambridge England
- Birth Control Rev*.—*Birth Control Review* New York
- Bl f Gsundhspf*.—*Blätter für Gesundheitspflege* Zurich, Switzerland [Continued as *Schweiz Bl f Gsundhspf*]
- Bol d Cons sup de salub*.—*Boletín del Consejo superior de salubridad* San Salvador, El Salvador

- \***Bol d Hosp of tal de Ntra Sra de la Luz**—Boletín del Hospital oftalmológico de Ntra Sra de la Luz Izequel Montes, 135, México, D F
- Bol d Inst pat**—Boletín del Instituto patológico México, D F
- Bol de med y cir**—Boletín de medicina y cirugía Madrid
- Bol san Dep nac hig**, Buenos Aires—Boletín sanitario del Departamento nacional de higiene Buenos Aires
- \***Bol Sec san policía nac**—Boletín de la Sección de sanidad de la policía nacional Oquendo y Estrella, Habana
- \***Boll Soc ital di med e ig trop.**—Bollettino della Società italiana di medicina e igiene tropicale (Sezione Eritrea) L'Ospedale "Regina Elena" di Asmara, Eritrea
- \***Brasil méd -cir.**—Brasil médico-cirúrgico Caixa Postal 3685, Rio de Janeiro
- Brit & Colon Druggist**—British and Colonial Druggist London
- Brit & For M Rev**—British and Foreign Medical Review London
- Brit J Child Dis**—British Journal of Children's Diseases London [Ceased publication July 1944]
- Brit J Inebr**—British Journal of Inebriety London
- Brit J Rheumat**—The British Journal of Rheumatism Baillière, Tindall & Cox, 11 Henrietta St, London, W C 2 (Temporarily suspended)
- Bull Am Acad Med**—Bulletin of the American Academy of Medicine Easton, Pa [Continued as J Social Med]
- Bull Am Cancer Soc**—Bulletin of the American Cancer Society, Inc New York [Ceased publication]
- Bull Basic Sc Research**—Bulletin of Basic Science Research Cincinnati Ohio [Temporarily discontinued, 1935]
- \***Bull Charlotte Mem Hosp**—Bulletin of the Charlotte Memorial Hospital The Heine man Foundation, Charlotte, N C
- Bull gén de thérap**—Bulletin général de thérapeutique médicale et chirurgicale Paris
- Bull d'histol appliq à la physiol**—Bulletin d histologie appliquée à la physiologie et à la pathologie et de technique microscopique Lyon
- \***Bull Inst d'hyg Maroc**—Bulletin de l Institut d'hygiène du Maroc Editions l'elx Moncho, Rue de la Mamounia, Rabat, Maroc
- Bull Jackson Mem Hosp**—Bulletin of the Jackson Memorial Hospital [Ceased publication]
- Bull Manila M Soc**—Bulletin of the Manila Medical Society Manila P I
- Bull Med & Chir Fac Maryland**—Bulletin of the Medical and Chirurgical Faculty of Maryland Baltimore
- Bull méd de Quebec**—Le Bulletin médical de Quebec
- Bull et mem Soc anat de Paris**—Bulletins et mémoires de la Société anatomique de Paris
- Bull et mem Soc d chirurgiens de Paris**—Bulletins et mémoires de la Société des chirurgiens de Paris
- Bull Soc anat de Paris**—Bulletin de la Société anatomique de Paris [Continued as Bull et mem Soc anat de Paris]
- Bull Soc belge de gynéc et d'obst**—Bulletin de la Société belge de gynécologie et d'obstétrique Brussels

- Bull Soc franç d urol** —Bulletin de la Société française d'urologie Paris. [Ceased publication]
- Bull. Soc de pharm de Paris** —Bulletin de la Société de pharmacie de Paris
- Bull Soc d'ac d'Alger** —Bulletin de la Société des sciences physiques naturelles et climatologiques d'Alger Algiers Algeria
- Bull Soc scient d'hyg aliment** —Bulletin de la Société scientifique d'hygiène alimentaire et d'alimentation rationnelle de l'homme Paris
- Bull à trav Soc de pharm de Bordeaux** Bulletin des travaux de la Société de pharmacie de Bordeaux Bordeaux France
- Bull War Med** —Bulletin of War Medicine London [Ceased publication]
- Caducee** —Le caducée Journal de chirurgie et de médecine d'armée Paris
- Cairo Sc J** —Cairo Scientific Journal Alexandria Egypt
- California M & S Reporter** —California Medical and Surgical Reporter Los Angeles
- Canad J Med & Surg** —Canadian Journal of Medicine and Surgery Toronto [Ceased publication]
- Canad J Ment Hyg** —Canadian Journal of Mental Hygiene Toronto
- Canad Pract & Rev** —Canadian Practitioner and Review Toronto [Consolidation of Canad Pract and Canad M Rev]
- Canada Lancet** —Canada Lancet Toronto
- Canada M Rec** —Canada Medical Record Montreal
- Cancer, Bruxelles** —Le cancer publié le Bulletin de la Société belge de cancérologie Brussels [Ceased publication]
- Centralbl** . See also Zentralbl
- Centralbl f allg Gendbtpfllg** —Centralblatt für allgemeine Gesundheitspflege Bonn Germany
- Centralbl f allg Path u path Anat** —Centralblatt für allgemeine Pathologie und pathologische Anatomie Jena Germany [Continued as Zentralbl f allg Path u path Anat]
- Centralbl f Bakt** —Centralblatt für Bakteriologie Parasitenkunde und Infektionskrankheiten Jena Germany [Continued as Zentralbl f Bakt]
- Centralbl f d Grenzgeb d Med u Chir** —Centralblatt für die Grenzgebiete der Medizin und Chirurgie Jena Germany
- Centralbl f d Krankh d Harn- u Sex- Org** —Centralblatt für die Krankheiten der Harn und Sexual Organe Leipzig [Combined with Monatsbl f Urol to form Ztschr f Urol]
- Centralbl f d med Wissensch** —Centralblatt für die medizinischen Wissenschaften Berlin
- Centralbl f Nerven u Psychiat** —Centralblatt für Nervenheilkunde und Psychiatrie Coblenz Germany Leipzig [Continued as Zentralbl f Nerven u Psychiat]
- Centralbl f prakt Augenb** —Centralblatt für praktische Augenheilkunde Leipzig
- Centralbl f Stoffwechsel- u Verdauungskr** —Centralblatt für Stoffwechsel und Verdauungskrankheiten Göttingen Germany [Continued as Zentralbl f d ges Physiol u Path d Stoffwechs]
- \*Ceylon Health News** —Ceylon Health News Department of Medical and Sanitary Services P O Box No 500 Colombo Ceylon
- Charité-Ann** —Charité Annalen Berlin
- Charlotte M J** —Charlotte Medical Journal
- Chem Abstr** —Chemical Abstracts Easton, Pa
- Chem News** —Chemical News and Journal of Physical Science London

- Chem Zentralbl — *Chemisches Zentralblatt* Leipzig
- Chicago M Rec. — *Chicago Medical Recorder* [Continued as *Radiol Rev & Chicago M Rec*]
- Child Development — *Child Development Abstracts and Bibliography* Baltimore
- Child Study — *Child Study* New York
- Chir dell'ernia — *Chirurgia dell'ernia* Naples
- \*Cien e invest — *Ciencia e investigacion* San Martín 427 Buenos Aires
- \*Ciencia — *Ciencia* Revista hispano americana de ciencias puras y aplicadas Alta mirano 127, Mexico D F
- Cincinnati M J — *Cincinnati Medical Journal*
- \*Cir d ap locom — *Cirugia del aparato locomotor* Atocha 115 Madrid
- Cleveland M J — *Cleveland Medical Journal*
- Clifton M Bull — *Clifton Medical Bulletin* Clifton Springs N Y
- Clin chir — *Clinica chirurgica* Milan Italy
- Clin mod — *Clinica moderna* Florence Italy
- Clin opht — *La clinique ophtalmologique* Paris
- \*Cln Proc Child Hosp — *Clinical Proceedings of the Children's Hospital* Mrs Olive Tabb, Exec Sec'y Children's Hospital Washington D C
- \*Clinica, Bologna — *Clinica* L. Cappelli Via Farini 6 Bologna
- Clinica — *Clinica* [Ceased publication]
- Clinique, Chicago — *The Clinic*
- Clinique, Montreal — *La Clinique*
- Columbus M J — *Columbus Medical Journal*
- Compt rend Acad roy de méd de Belgique — *Compte rendu des travaux de l'Académie royale de médecine de Belgique* Brussels
- \*Compt rend Acad d sc URSS — *Comptes rendus (doklady) de l'Académie des sciences de l'URSS* Volkhonka 14 Moskva 19
- Compt rend de l'Assoc d anat — *Comptes rendus de l'Association des anatomistes* Paris, Nancy, France
- \*Compt rend d trav du lab Carlsberg, série chim — *Comptes rendus des travaux du laboratoire Carlsberg série chimique* Carlsberg Laboratory Copenhagen
- \*Cong méd domin centen, mem — *Congreso médico dominicano del centenario* memo ria Santiago Republica Dominicana
- Contrib Embryol — *Contributions to Embryology* Washington D C
- Cor-Bi fachweis Aerzte — *Correspondenz Blatt für schweizer Aerzte* Basel Switzerland
- Cor-Bi f Zahnärzte — *Correspondenz Blatt für Zahnärzte* Berlin
- Cornell Vet — *Cornell Veterinarian* Ithaca N Y
- Cron med mex — *Crónica médica mexicana* Mexico D F
- Crón ofal — *Crónica oftalmológica* Cádiz Spain
- Dementia Præcox Stud — *Dementia Præcox Studies* Chicago
- Dental Cosmos — [Ceased publication]
- Dental Digest — *Dental Digest* New York
- Dental Items Interest — *Dental Items of Interest* Brooklyn
- Dental Rev — *Dental Review* Chicago
- Dermat Wehnschr — *Dermatologische Wochenschrift* Leipzig
- Detroit M J — *Detroit Medical Journal*



- Deutsche Klin —Deutsche Klinik am Fingange des zwanzigsten Jahrhunderts in akademischen Vorlesungen Berlin, Vienna
- Deutsche Med-Ztg —Deutsche Medizinische Zeitung Berlin
- Deutsche med-ärztl Ztschr —Deutsche medizinisch-ärztliche Zeitschrift Berlin
- Deutsche Monatsschr f Zahnk —Deutsche Monatsschrift für Zahnheilkunde Leipzig
- Deutsche zahnärztl.Ztg —Deutsche zahnärztliche Zeitung Munich Germany
- Deutsche Ztschr f Thiermed —Deutsche Zeitschrift für Thiermedizin und vergleichende Pathologie Leipzig
- Dominion M Monthly —Dominion Medical Monthly Toronto
- Epidemiol Inform Bull —Epidemiological Information Bulletin [Censored publication]
- Epidemiol Rep ,League of Nations —Monthly Epidemiological Report of the Health Section of the Secretariat, League of Nations Geneva Switzerland [Censored publication]
- Epilepsia Epilepsia Amsterdam Leipzig
- Ergebn d Anat u Entwicklungsgesch Ergebnisse der Anatomie und Entwicklungsgeschichte Wiesbaden Germany [Form 2 Abteilung of Anat Hefte]
- Eugenica Rev Eugenica Review London
- Evolution méd-chir —Evolution médico-chirurgicale Paris
- \*Farmacoterap actual —Farmacoterapia actual Alberto Aguilera 10 Madrid
- Förh svenska läk-sällsk sammank Föreläsningar vid svenska läkare-sällskapets sammankomster Stockholm Sweden [Supplement to Hygiea Stockholm]
- Folia gynaeec —Folia gynaecologica Pavia Italy
- Folia neuro-biol —Folia neuro-biologica Leipzig
- \*Folia oto-laryng orient —Continued as Acta oto-laryng orient
- Folia aeorl —Folia aerologica Leipzig [Continued as Ztschr f Chemotherapie]
- Folia urol —Folia urologica Internationales Archiv für die Krankheiten der Harnorgane Leipzig
- \*Fontilles —Fontilles : Trabajos y estudios realizados en la Colonia-Sanatorio de San Francisco de Borja para leproso Plaza Tetuán 18 b'yo, Valencia España
- \*Friuli med —Il Friuli medico Biblioteca dell Ospedale civile Udine Italia
- \*Gac med ,Lima —Gaceta médica José Gálvez No 192 Lima
- Gastrol polska —Gastrologia polska Warsaw, Poland
- Gaz hebd de med —Gazette hebdomadaire de médecine et de chirurgie Paris
- Gaz.hebd d.sc méd de Bordeaux —Gazette hebdomadaire des sciences médicales de Bordeaux Bordeaux France
- Gaz.lek —Gazeta lekarska Warsaw Poland
- Gaz.d mal inf —Gazette des maladies infantiles et d'obstétrique Paris
- Gaz.med da Bahia —Gazeta medica da Bahia Bahia Brazil
- Gaz.méd belge —Gazette médicale belge Liège
- Gazz.med —Gazzetta medica (Medical Gazette) New York
- Gazz.med napolet —Gazzetta medica napoletana Naples
- Gazz.med di Torino —Gazzetta medica di Torino Turin, Italy
- Gegen d Tuberk —Gegen die Tuberkulose Bern Switzerland
- Ginek polska —Ginekologia polska Warsaw, Poland
- \*Gior ital chir —Giornale italiano di chirurgia V Idelson Via de Marconi 19 Napoli
- \*Gior di med —Giornale di medicina R Clinica Medica Policlinico Palermo
- Gior di med ferrov —Giornale di medica ferroviaria Prato Italy

- Giornale per la morfologia dell'uomo e dei primati Pavia, Italy  
 Grèce méd.—Grèce médicale Athens  
 Gulf States J Med & Surg—Gulf States Journal of Medicine and Surgery and Mobile Medical and Surgical Journal Mobile Ala  
 Gynæc helvet—Gynæcologia helvetica Geneva Switzerland  
 Gynæk Rundschau—Gynäkologische Rundschau Berlin Venna  
 Gyógyszerészeti hetil.—Gyógyszerészeti hetilap Budapest  
 \*Health & Med—Health & Medicine P O Box 1033 Johannesburg  
 Health Officer—Ceased publication  
 Hereditas—Hereditas Lund Sweden  
 Hist Acad roy d sc—Histoire de l'Académie royale des sciences Paris  
 Hist Soc roy de med—Histoire de la Société royale de médecine avec les mémoires de médecine et de physique médicale tirés des registres de cette société Paris  
 Hora med, Rio de Janeiro—Hora médica do Brasil Rio de Janeiro  
 Hyg Bl, Berlin—Hygienische Blätter Berlin  
 Hyg gen et appliq—Hygiène générale et appliquée Paris  
 Hyg mod—Hygiène moderne Paris  
 Hyg Rundschau—Hygienische Rundschau Berlin  
 Hygea—Hygea Karlsruhe Germany  
 \*Hyghionomika—Hyghionomika 70 Patison St., Athens  
 Hygiene—Hygiene London  
 Iberia méd—Iberia médica Madrid  
 Idrol e climat.—Idrologia e climatologia e la terapia fisica Turin Florence Italy  
 Igene mod—Igiene moderna Genoa Italy  
 \*Igiene e san pub—Igiene e sanità pubblica Rivista mensile scientifico-pratica Rione Carmine 3ª traversa Pastore Palazzo Primavera Salerno  
 Igene d scuola—Igiene della scuola rivista mensile Genoa Italy  
 Igene e vita—Igiene e la vita Turin Italy  
 Incurabili—Incurabili Naples  
 Indépend med—Indépendance médicale Montreal  
 Indian J Med—Indian Journal of Medicine Calcutta  
 Indianapolis M J—Indianapolis Medical Journal Indianapolis Ind [Continued as M Arts & Indianapolis M J]  
 Indust Bull—Industrial Bulletin Albany N Y  
 \*Indust Hyg Found Tr Manag Sect—Industrial Hygiene Foundation Transactions Management Section Tenth Annual Meeting 4400 Fifth Ave Pittsburgh 13  
 \*Inform. enferm ven—Información sobre enfermedades venéreas Oficina sanitaria panamericana Versalles 49 México D F  
 Intercolon M J Australasia—Intercolonial Medical Journal of Australasia Melbourne Australia [Continued as Australasian M J]  
 Internat Centralbl f d ges Tuberk-Forsch—Internationales Centralblatt für die gesamte Tuberkulose Forschung Würzburg Germany  
 Internat Clin—Continued as Clinics  
 Internat Dent J—International Dental Journal New York Philadelphia  
 Internat Dermat Cong Tr—International Dermatological Congress Official transactions New York.



- J Roy Micr Soc —Journal of the Royal Microscopical Society London
- J d sc med de Lille —Journal des sciences médicales de Lille Lille, France
- J Sexol & Psychanal —Journal of Sexology and Psychoanalysis New York
- J Sociol Med —Journal of Sociologic Medicine Easton Pa
- J f Zahnh —Journal für Zahnheilkunde Breslau Germany Berlin
- Jahrb d Hamb Staatskrankenanst —Jahrbucher der Hamburgischen Staatskrankenanstalten Leipzig, Hamburg Germany
- Jahrb f Mil Aerzte —Jahrbuch für Militär Aerzte Vienna
- Jahrb d pract Med —Jahrbuch der practischen Medicin Berlin
- Jahrb f prakt Heilk —Jahrbucher für praktische Heilkunde Tübingen, Germany
- Jahrb faex Zwischenstufen —Jahrbuch für sexuelle Zwischenstufen Leipzig
- Jahresb u d Fortschr a d Geb d Chir —Jahresbericht über die Fortschritte auf dem Gebiete der Chirurgie Wiesbaden Germany
- Jahresb u d Fortschr d ges Med —Jahresbericht über die Fortschritte der gesamten Medicin Erlangen Germany
- Jahresb u d Fortschr d Thierchem —Jahresbericht über die Fortschritte der Thierchemie (Maly's) Wiesbaden Germany
- Jahresb u d ges Ophth —Jahresbericht über die gesamte Ophthalmologie Berlin
- Jahresb u d Leistung d ges Med —Jahresbericht über die Leistungen und Fortschritte der gesamten Medizin Berlin
- Japan M World —Japan Medical World Tokyo
- Japan Ztschr f Dermat u Urol —Japanische Zeitschrift für Dermatologie und Urologie Tokyo
- Japan Ztschr f Verdauungs-Krankh —Japanische Zeitschrift für Verdauungskrankheiten Tokyo
- Kindertuberk —Kindertuberkulose Munich Germany
- Klin Beitr z Gynak —Klinische Beiträge zur Gynakologie Breslau Germany
- Klin-therap Wchnschr —Klinisch therapeutische Wochenschrift Vienna Berlin
- \*Laboratorio — Laboratorio Análisis clínicos bacteriología inmunología parasitología hematología anatomía patológica-química clínica Gran Vía 27 Granada
- \*Lav d Ist anat e istol pat ,Perugia —Lavori dell Istituto di anatomia e istologia patologica della Università degli studi di Perugia Perugia, Italia
- Lettura oftal —Lettura oftalmologica Pistoia Italy
- Leucocyte —Leucocyte Detroit Mich
- Liebig's Annalen See Ann d Chem
- Liverpool Med-Chir J —Liverpool Medical-Chirurgical Journal Medical History 114 Mt Pleasant, Liverpool 3 (Temporarily discontinued 1941)
- Long Island M J —Long Island Medical Journal Brooklyn N Y History of Medicine Times & Long Island M J
- \*Lumen —Lumen Agrupación católica universitaria San Miguel History of Medicine
- M.Advance —Medical Advance Batavia Ill
- M Arts & Indianapolis M J —Medical Arts and Indianapolis Medical Journal Indianapolis, Ind
- M Brief —Medical Brief St Louis Mo (Ceased publication)
- M Bull —Medical Bulletin Philadelphia

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- M Counselor** —Medical Counselor Chicago  
**M Critic & Guide** —Medical Critic and Guide New York  
**M Fortnightly** —Medical Fortnightly St. Louis Mo  
**M Herald** —Medical Herald St. Joseph Mo  
**M News** —Medical News London  
**M Notes & Queries** —Medical Notes and Queries Lancaster Pa  
**M Progress** —Medical Progress New York  
**M Rev** —Medical Review St. Louis Mo  
**M Rev of Rev** —Medical Review of Reviews New York  
**M Sentinel** —Medical Sentinel Portland Ore [Continued as West J Surg]  
**M Standard** —Medical Standard Chicago  
**M Summary** —Medical Summary Philadelphia  
**M & S Rep City Hosp, Boston** —Medical and Surgical Reports of the City Hospital of the City of Boston  
**M Times & Gaz** —Medical Times and Gazette London  
**M Times & Long Island M J** —Medical Times and Long Island Medical Journal New York  
**M Tribune** —Medical Tribune New York  
**M World** —Medical World Philadelphia  
**Madras J M Sc** —Madras Journal of Medical Science Madras India  
**Mag f d ges. Thierh** —Magazin für die gesammte Thierheilkunde Berlin [Continued as Arch f wissenschaft u prakt Thierh]  
**Malarologia** —Malar logia Naples  
**Maryland M J** —Maryland Medical Journal Baltimore  
**Massachusetts M J** —Massachusetts Medical Journal Boston  
**Bibliot f prakt Aerzte** —Medicinnel e Bibl othek für praktische Aerzte Leipzig  
**chirurg med prat** —Medicina e chirurgia del medico pratico Naples  
**y cir, Bogota** —Medicina y cirugía Apartado 276 Bogotá  
**led Inf** —La médecine infantile Paris  
**Med internat** —Médecine internationale Paris  
**Med ital** —Medicina italiana Milan  
**Med latina** —Medicina latina Madrid  
**\*Med latina Habana** —Medicina latina Cuba 82 Habana  
**Med-Leg J** —Medico-Legal Journal New York  
**Méd mod** —Médecine moderne Paris  
**Med Monatschr** —Medicinishe Monatschrift New York  
**Med obozr** —Meditsinskoie obozreniye Moscow  
**Med prat** —Médecine pratique Paris  
**Med Rev, Haarlem** —Medische Revue Haarlem Netherlands  
**Med du trav** —La médecine du travail Lyon  
**Med Weekbl** —Medisch Weekblad voor Noord en Zuid Nederland Amsterdam  
**Medecin stomatol** —Médecin stomatologiste Paris  
**Mém Acad imp d sc de St Petersburg** —Mémoires de l'Académie impériale des sciences de St Petersburg Leningrad  
**Mem d r Accad d sc d Ist di Bologna** —Memorie della reale Accademia delle scienze dell'Istituto di Bologna Bologna Italy

- Mém Fac de méd de Paris — Mémoires de la Faculté de médecine de Paris et de la Société établie dans son sein
- Memphis M Monthly — Memphis Medical Monthly
- Midi med — Midi médical Toulouse France [Continued as Arch méd de Toulouse]
- Midland Drug & Pharm Rev — Midland Druggist and Pharmaceutical Review  
Columbus Ohio
- \*Minerva chir — Minerva chirurgica Casella Postale 491 Torino
- Mitt d anthrop Gesellsch in Wien — Mittheilung der anthropologischen Gesellschaft in  
Wien Vienna
- Mitt d Gesellsch f inn Med u Kinderh — Mittheilungen der Gesellschaft für innere  
Medizin und Kinderheilkunde Vienna
- Mitt d gynaecl Klin d O Engström in Helsingfors — Mittheilungen aus der gynaeckolo-  
gischen Klinik des Prof Dr Otto Engström in Helsingfors Berlin
- Mitt d med Fak d k Univ Kyushu Fukuoka — Mittheilungen aus der medizinischen  
Fakultät der kaiserlichen Universität Kyushu Fukuoka Japan Kyushu Japan
- Mitt d med Gesellsch zu Osaka — Mittheilungen der medizinischen Gesellschaft zu  
Osaka Osaka Japan
- Mitt d thierärztl Praxis im preuss Staate — Mittheilungen aus der thierärztlichen  
Praxis im preussischen Staate Berlin [Supplement to Arch f wissensch u prakt  
Thierh.]
- Mobile M & S J — Mobile Medical and Surgical Journal [Continued as Gulf States J  
Med & Surg]
- Mois med-chir — Mois médico chirurgical Paris
- Monatschr f Krim-Psychol — Monatschrift für Kriminalpsychologie und Strafrechts-  
reform Heidelberg Germany
- Monatschr ungar Med — Monatschrift ungarischer Mediziner Budapest
- Monatschr f prakt Dermat — Monatshefte für praktische Dermatologie Hamburg Ger-  
many Leipzig [Continued as Dermat Wchnschr]
- Monatschr f prakt Thierh — Monatshefte für praktische Thierheilkunde Stuttgart Ger-  
many
- Monitore zool ital — Monitore zoologico italiano Siena Florence
- Monthly Cycl Pract Med — Monthly Cyclopaedia of Practical Medicine Philadelphia
- Montpellier med — Montpellier médical
- Montreal M J — Montreal Medical Journal [Merged in Canad M A J]
- Morgagni — Morgagni Milan Italy [Ceased publication]
- “ “ “
- Neurol Centralbl — Neurologisches Centralblatt Leipzig
- Neurotherapie — Neurotherapie Amsterdam
- New England M Monthly — New England Medical Monthly Danbury Conn
- New York M Press — New York Medical Press [Merged in Am M Times]
- N n “ “ — Nuova a Naples

- Nord ophth Tidsskr** — Nordisk ophthalmologisk Tidsskrift Copenhagen Denmark  
**Normandie méd** — Normandie médicale Rouen France  
**Norsk tidsskr f mil-med** — Norsk tidsskrift for militærmedicin Oslo Norway  
**North Am J Homeop** — North American Journal of Homeopathy New York  
**North Am Pract** — North American Practitioner Chicago  
**Nouv iconog de la Salpêtrière** — Nouvelle iconographie de la Salpêtrière clinique des maladies du système nerveux Paris  
**Obozr psikiat, nevrol** — Obozreniye psikhiiatrii, nevrologii i eksperimentalnoi psikhologii (Review of Psychiatry, Neurology and Experimental Psychology) Leningrad  
**Obshch-san obozr** — Obshchestvenno-sanitarnoye obozreniye (Public Health Review) Leningrad  
**Oesterr Monatschr f Thierh** — Oesterreichische Monatschrift für Thierheilkunde Vienna  
**Oesterr-ungar Vrttschr f Zahnh** — Oesterreichische-ungarische Vierteljahrsschrift für Zahnheilkunde Vienna  
**Oesterr.Ztschr f Kinderh** — Oesterreichische Zeitschrift für Kinderheilkunde Vienna  
**Oesterr.Ztschr f Stomatol** — Oesterreichische Zeitschrift für Stomatologie Vienna  
**Oesterr.Ztschr f wissensch Veterinarh** — Oesterreichische Zeitschrift für wissenschaftliche Veterinarheilkunde Vienna  
**Otchet o deyateln khirurg klin v Mosk** — Otchet o deyatelnosti khirurgicheskoi kliniki Iverskoi Obshchestva Syester Miloserdia v Moskve (Report of the Work of the Surgical Clinic of the Iversan Society of Sisters of Mercy in Moscow) Moscow  
**Pacific Coast J Homeop** — Pacific Coast Journal of Homeopathy Los Angeles Calif  
**Pacific M J** — Pacific Medical Journal San Francisco  
**Pediatrica españ** — Pediatría española Madrid  
**Pediatrica prat Modena** — Pediatrica pratica Modena Italy [Ceased publication]  
**Pediatriya** — Pediatrya Moscow  
**\*Peoria M News** — The Peoria Medical News W I Owen Sec y Treas 331 Fulton St, Peoria Ill  
**Pest med-chir Presse** — Pester medicinisch-chirurgische Presse Budapest  
**Pharm Fra** — Pharmaceutical Era New York  
**Pharm J** — Pharmaceutical Journal London  
**Pharm Rec** — Pharmaceutical Record New York [Merged in Am Druggist]  
**Pharm.Zentralhalle** — Pharmaceutische Zentralhalle für Deutschland Berlin, Dresden Germany  
**Pharm Ztg** — Pharmaceutische Zeitung Berlin  
**Pharmakol u therap Rundschau** — Pharmakologische und therapeutische Rundschau Vienna [Supplement to Wien Klin Rundschau]  
**Philippine J Trop Med** — Philippine Journal of Tropical Medicine Manila  
**Phys & Surg** — Physician and Surgeon London  
**Physical Therap** — Physical Therapeutics Flint N Y  
**\*Plantation Health** — Plantation Health Aiea Oahu T H  
**Plexus** — Plexus Chicago  
**Pop Sc Monthly** — Popular Science Monthly New York [Continued as Scient Monthly]  
**\*Population** — Population Revue trimestrielle de l'Institut national d'études démographiques Presses Universitaires de France 108 Boulevard Saint Germain, Paris 6

- Pract.Med & Surg** —Practical Medicine and Surgery Austin, Texas
- Prag med Wehnschr** —Prager medizinische Wochenschrift Prague Czechoslovakia
- Prat chir** —Pratica chirurgica e delle discipline affini Perugia, Italy
- \*Prensa méd, La Paz** —Prensa médica Casilla no 891, La Paz, Bolivia
- Presse therm et climat** —Presse thermique et climatique Paris
- Proc A Life Insur Pres** —Proceedings of the Association of Life Insurance Presidents New York
- Proc Am A Adv Sc** —Proceedings of the American Association for the Advancement of Science Salem, Mass
- Proc Am A Phys & Surg** —Proceedings of the American Association of Physicians and Surgeons Indianapolis, Ind
- \*Proc Am Diabetes A** —Proceedings of the American Diabetes Association 1019 Provident Bank Bldg, Cincinnati
- Proc.Am.Federation Organ for Hard of Hearing, Inc** —Proceedings of the American Federation of Organizations for the Hard of Hearing, Incorporated Washington, D C
- Proc Am Pharm A** —Proceedings of the American Pharmaceutical Association Philadelphia
- \*Proc Am Philos Soc** —Proceedings of the American Philosophical Society Independence Sq, Philadelphia 6
- \*Proc Anniv Tufts Coll M School** —Proceedings of the Fiftieth Anniversary of Tufts College Medical School Tufts College Boston
- Proc Internat Assemb Inter-State Post-Grad M A North America** —Proceedings of the International Assembly of the Inter State Post Graduate Medical Association of North America Atlanta Ga
- Proc Life Ext Exam** —Proceedings of the Life Extension Examiners New York [Ceased publication]
- Proc Nat Confer Char** —Proceedings of the National Conference of Charities and Correction St Paul
- Proc New York Path Soc.** —Proceedings of the New York Pathological Society New York
- Proc Path Soc Philadelphia** —Proceedings of the Pathological Society of Philadelphia
- Proc Philadelphia Co M Soc** —Proceedings of the Philadelphia County Medical Society
- Proc Roy M & Chir Soc** —Proceedings of the Royal Medical and Chirurgical Society of London
- Proc Roy Soc Edinburgh** —Proceedings of the Royal Society of Edinburgh
- Proc Third Ann East States Conf Bang's Dis** —Proceedings of the Third Annual Eastern States Conference on Bang's Disease Trenton N J
- Proc U S Nat Mus** —Proceedings of the U S National Museum Washington, D C
- Przegl chir** —Przegląd chirurgiczny (Surgical Review) Warsaw Poland
- Psychotherapeut Praxis** —Ceased publication
- Pubbli datazione zool di Napoli** —Pubblicazioni della stazione zoologica di Napoli Naples
- Quaderni di psichiat** —Quaderni di psichiatria Genoa, Italy
- Quart Fed State M Bds** —Quarterly of the Federation of State Medical Boards of the United States Easton Pa
- Quart J Inebr** —Quarterly Journal of Inebriety Hartford Conn
- Quart M Clin** —Quarterly Medical Clinics St Louis
- Queen's M Quart** —Queen's Medical Quarterly Kingston Canada
- Quinzaine med** —Quinzaine médicale de la France et de l'étranger Paris



- Quinzaine thérap — Quinzaine thérapeutique Paris
- Radiol Rev & Chicago M Rec — Radiological Review and the Chicago Medical Recorder Quincy Ill
- Radium, Paris — Radium Paris
- Railway Surg J — Railway Surgical Journal Chicago
- Rap épidémiol, Soc d Nations — See Epidemiol Rep League of Nations
- \*Rassegna di neurol veget — Rassegna di neurologia vegetativa Borgo, nissarti 2 Firenze
- Rassegna previd. sociale — Rassegna della previdenza sociale [Ceased publication]
- Rec d'opht — Recueil d'ophtalmologie Paris
- Rec d trav chim d Pays-Bas — Recueil des travaux chimiques des Pays Bas Amsterdam
- \*Rec trav ac méd Congo belge — Recueil de travaux de sciences médicales au Congo belge Direction du Service de l'Hygiène Léopoldville Congo belge
- Rep Brit. A Adv Sc — Reports of meetings of the British Association for the Advancement of Science London
- Rep Nat Quarantine Serv — Reports National Quarantine Service Shanghai China [Ceased publication]
- \*Réunions méd-chir 1<sup>re</sup> armée franç — Réunions médico-chirurgicales de la 1<sup>re</sup> armée française Numéro spécial édité par l'Algérie médicale et l'Afrique française chirurgicale 3 rue Pélissier Alger
- Rev anthrop — Revue anthropologique Paris
- Rev. argent de cien méd — Revista argentina de ciencias médicas Buenos Aires
- \*Rev Brasil oftal — Revista brasileira de oftalmologia Rodrigo Silva, 7-1<sup>a</sup> Andar, Rio de Janeiro
- Rev de chir, Paris — Revue de chirurgie Paris
- \*Rev Cruz Roja colomb — Revista de la Cruz Roja colombiana Órgano del Comité central de la Cruz Roja nacional Apartado 1110 Bogotá
- \*Rev cubana tuberc — Revista cubana de tuberculosis Órgano oficial de la Sociedad cubana de fisiología Línea núm 51 esquina a N Vedado Habana
- \*Rev españ fisiol — Revista española de fisiología Juan Jiménez Vargas Cavanova 143 Barcelona
- Rev españ de med y cir — Revista española de medicina y cirugía Barcelona Spain
- Rev españ de urol y dermat — Revista española de urología y dermatología Madrid
- Rev gén d'opht — Revue générale d'ophtalmologie Paris
- Rev de gynéc et de chir abd — Revue de gynécologie et de chirurgie abdominale Paris
- Rev hebdom de laryng — Revue hebdomadaire de laryngologie d'otologie et de rhinologie Paris [Continued as Rev de laryng]
- \*Rev Hosp niño — Revista del Hospital del niño Avenida Brasil Lima Peru
- Rev d'hyg et de therap ocul — Revue d'hygiène et de thérapeutique oculaires Paris [Continued as Rev internat d'hyg et de therap ocul]
- Rev ibero-am de cien méd — Revista ibero-americana de ciencias médicas Madrid
- \*Rev Inst Adolfo Lutz — Revista do Instituto Adolfo Lutz Avenida Dr Arnaldo 3 Sao Paulo
- \*Rev interam hosp — La revista interamericana de hospitales See Hospital New York
- Rev internat d'hyg et de therap ocul — Revue internationale d'hygiène et de thérapeutique oculaire Paris
- Rev internat de méd et de chir — Revue internationale de médecine et de chirurgie Paris. [Ceased publication]

- Rev de laryng —Revue de laryngologie d otologie et de rhinologie Paris
- \*Rev Liga puertorriq contra el cancer —Revista de la Liga puertorriquena contra el cancer Organó de divulgación y propaganda educativa Apartado de Correo Núm 2468 San Juan Puerto Rico
- Rev med-chir mal foie —Revue médico-chirurgicale des maladies du foie, du pancréas et du lymphatique Lyon
- \*Rev med y ciencias México —Revista de medicina y ciencias afines Apartado Postal 8009 México D F
- Rev de med y cir —Revista de medicina y cirugía Barcelona Spain
- Rev de med y cir pract —Revista de medicina y cirugía prácticas Madrid
- \*Rev med exper ,Lima —Revista de medicina experimental Casilla 451 Lima
- Rev med german ibero-am —Revista médica germano-ibero-americana Georg Thieme Rosaplatz 12 Leipzig G 1 (Temporarily discontinued 1938)
- Rev med d Hosp gen —Revista médica del Hospital general México D F
- Rev de med e hyg mil —Revista de medicina e higiene militar Rio de Janeiro Brazil
- Rev med latino-am —Revista médica latino americana [Ceased publication]
- Rev med ,México —Revista médica México D F
- \*Rev med Moyen-Orient —La revue médicale du Moyen Orient Les Lettres françaises Beyrouth Lebanon
- \*Rev med d Paraguay —Revista médica del Paraguay Organó oficial de la Sociedad de medicina y cirugía y especialidades 25 de Mayo y Tacuarí Asunción
- Rev med-quir —Revista médico-quirúrgica Quito Ecuador
- \*Rev med quir de pat fem —Revista médico-quirúrgica de patología femenina Bustamante 2531 Buenos Aires
- \*Rev med Rio Grande do Sul —Revista de medicina do Rio Grande do Sul Avenida Getúlio Vargas nº 577 Porto Alegre Brazil
- Rev med de São Paulo —Revista médica de São Paulo São Paulo Brazil
- Rev mens de gynec ,d obst et de pédiat —Revue mensuelle de gynécologie d obstétrique et de pédiatrie Paris
- Rev mens d mal de l enf —Revue mensuelle des maladies de l'enfance Paris
- Rev mex de biol —Revista mexicana de biología México D F
- Rev v neuropsychopath —Revue v neuropsychopathologie therapie veréjné hygiené a lékarství socialistím Prague Czechoslovakia
- \*Rev nutrición —Revista de nutrición Instituto nacional de nutrición Dirección general de salubridad Ministerio de salud pública y asistencia social Av Salaverry Lima
- Rev d oto-neuro-opht —Revue d oto-neuro-ophtalmologie Paris
- \*Rev Policlín Valencia —Revista de la Policlínica Valencia Calle Libertad 151 Valencia Venezuela
- Rev prat de biol —Revue pratique de biologie appliquée à la clinique et à la thérapeutique Paris
- Rev prat d hyg municip —Revue pratique d hygiène municipale urbaine et rurale Paris [Discontinued]
- Rev prat d obst et de gynec —Revue pratique d obstétrique et de gynécologie Paris
- Rev de Radiol X —Revista de Radiología V Berlín
- \*Rev du rhum —Revue du rhumatisme et des maladies ostéo-articulaires L'Expansion Scientifique Française 23 rue du Cherche-Midi Paris 8°
- \*Rev Soc port estomatol —Revista da Sociedade portuguesa de estomatologia Avenida da Liberdade 65 1° Lisboa

- Rev aud-am de méd et de chir** — *Revue sud américaine de médecine et de chirurgie* Paris [Ceased publication 1935]
- Rev de thérap med-chir** — *Revue de thérapeutique médico-chirurgicale* Paris
- \*Rev urol, Caracas** — *Revista de urología* Órgano de la Sociedad venezolana de urología Apartado 1429 Caracas
- Riv di antropol** — *Rivista di antropologia* Rome
- Riv di biol** — *Rivista di biologia* Milan Italy
- Riv clin di Bologna** — *Rivista clinica di Bologna* Bologna Italy
- Riv crit di clin med** — *Rivista critica di clinica medica* Florence Italy
- Riv d'ig e san pubbl** — *Rivista di igiene e sanità pubblica* Rome
- Riv internaz di terap fis** — *Rivista internazionale di terapia fisica* Rome
- Riv ital di neuropat** — *Rivista italiana di neuropatologia psichiatria ed elettroterapia* Catania
- Riv med** — *Rivista medica* Milan Italy
- Riv di med leg, Milan** — *Rivista di medicina legale e di giurisprudenza medica* Milan, Italy
- \*Riv ofstl** — *Rivista di oftalmologia* I: Salspietra Via delle Porte Nuove, 24 Firenze
- Riv di psicol applic a pedagog** — *Rivista di psicologia applicata alla pedagogia ed alla psicopatologia* Bologna Italy
- Roy London Ophth Hosp Rep** — *Royal London Ophthalmic Hospital Reports*
- \*Roy Melbourne Hosp Clin Rep** — *Royal Melbourne Hospital Clinical Reports* Business Manager 14 Parliament Place Melbourne C 2
- \*Rozpr Česke Akad Věd a Umění** — *Rozpravy České Akademie věd a umění* Series II (Matematicko-fyzikálně vědecká) Prague
- Rusk arch pat, klin med i bakt** — *Russkij arhiv patologii, klinicheskoi meditsiny i bakterologii* Leningrad
- Rusk j kozhn i ven bol** — *Russkij žurnal kozhnykh i venerecheskikh boleznej* Kharkov, U S S R
- Rusk vrach** — *Russkij vrach* Leningrad
- \*Salub y asist** — *Salubridad y asistencia* Órgano de la Secretaría de salubridad y asistencia Reforma y Liza Mexico D F
- Salubridad** — *Salubridad* Mexico D F
- \*Sat Eve Post** — *The Saturday Evening Post* The Curtis Publishing Co, Independence Sq Philadelphia 6
- Scalpel** — *Scalpel* Brussels Belgium
- Schizofrenie** — *Ceased publication*
- Schmidt's Jahrb** — *Schmidt's Jahrbücher* Leipzig
- Schweiz, Bl f Gesundheitspf** — *Schweizerische Blätter für Gesundheitspflege* Zurich Switzerland
- Schweiz, Monatschr f prakt Med** — *Schweizerische Monatsschrift für praktische Medizin* Berne Switzerland
- Schweiz Ztschr f Heilk** — *Schweizerische Zeitschrift für Heilkunde* Berne Switzerland
- \*Scient Am** — *Scientific American* Munn & Co Inc 24-26 W 40th St New York 18
- Scientia** — *Scientia* Bologna Italy
- Scritti biol** — *Scritti biologici* raccolti da Luigi Castaldi Stabilimento Tipografico San Bernardino Siena
- Semaine gynéc** — *Semaine gynécologique* Paris
- Semaine med** — *Semaine médicale* Paris

- Semana med españ.*—*Semana médica española* Madrid
- Settimana med d sper*—*Settimana medica dello sperimentale* Florence, Italy
- Siglo med*—*Siglo medico* Madrid
- Sitzungs d k. Akad. d. Wissensch Math-naturw Cl*—*Sitzungsbericht der kaiserlichen Akademie der Wissenschaften Mathematisch-naturwissenschaftliche Classe* Vienna
- Sitzungs d math-phys Cl d k.-bayer Akad. d. Wissensch zu München*—*Sitzungsberichte der mathematisch physikalischen Classe der königlich bayerischen Akademie der Wissenschaften zu München* Munich Germany
- Skandinav. Arch f Physiol*—Ceased publication
- Smithsonian Misc. Collect*—*Smithsonian Miscellaneous Collections* Washington D C
- Soc med Havn collect*—*Societas medicae Havniensis collectanea* Havniae
- South. California Pract.*—*Southern California Practitioner* Los Angeles
- South Clin*—*Southern Clinic* Richmond Va
- Southwest J. Med & Surg*—*Southwest Journal of Medicine and Surgery* El Reno Okla
- Southwestern Med*—*Southwestern Medicine* El Paso Texas [Ceased publication]
- Sovet.klin*—*Sovetskaya klinika* Moscow
- Sovet.vestnik venerol i dermat*—*Sovetskiy vestnik venerologii i dermatologii* Moscow
- Sovet.vrach zhur*—*Sovetskiy vrachebny zhurnal* Leningrad [Ceased publication]
- Soziale Med u Hyg*—*Soziale Medizin und Hygiene* Hamburg Germany
- St. Barth. Hosp J, War Ed*—*St Bartholomew's Hospital Journal War Edition* London [Ceased publication]
- St. Louis Clinique*—*St Louis Clinique*
- St. Louis Courier Med*—*St Louis Courier of Medicine* [Merged in Interstate M J]
- St. Paul M J*—*St Paul Medical Journal*
- St. Petersburg med Wchnshr*—*St Petersburg medicinsche Wochenschrift* Leningrad [Continued as *St Petersburg med Ztschr*]
- St Petersburg med Ztschr*—*St Petersburg medicinsche Zeitschrift* Leningrad
- St. Thomas's Hosp Rep*—*St Thomas's Hospital Reports* St Thomas's Hospital Westminster Bridge London S E 1 [Temporarily suspended]
- Surg J*—*Surgical Journal* Chicago [Combined with *Internat J Med & Surg*]
- Svenska ldk-sällsk förhandl*—*Svenska lakare sällskapets förhandlingar* Stockholm Sweden
- \**Tabulae biol*—*Tabulae biologicae* Uitgeverij Dr W Junk, Amsterdam
- Texas M J*—*Texas Medical Journal* Austin
- \**Therap clin*—*Thérapeutique clinique organisée par la Clinique thérapeutique universitaire de Genève (première et deuxième journées)* Albert Skira Genève
- Therap Gaz*—*Therapeutic Gazette* Detroit Mich [Discontinued March 1927]
- Therap Monatsh.*—*Therapeutische Monatshefte* Berlin
- Therap Neuheiten*—*Therapeutische Neuheiten* Leipzig
- Tidskr f d norske lægefor*—*Tidsskrift for den norske lægeforening* Oslo Norway
- Tijdschr v sociale hyg*—*Tijdschrift voor sociale hygiene en hygienische binden* Zwolle, Netherlands
- Toledo M & S Reporter*—*Toledo Medical and Surgical Reporter*
- \**Torreón med*—*Torreón médico* Órgano oficial de la Asociación médica de la Laguna Esquina Hidalgo y Rodríguez Torreón Coah México
- Tr A Resid & Ex-Resid Physicians, Mayo Clin*—*Transactions of the Association of Resident and Ex-Resident Physicians of the Mayo Clinic* Owatonna Minn

- Tr Am A Obst & Gynee — Transactions of the American Association of Obstetricians and Gynecologists Philadelphia
- Tr Am Bronch Soc — Transactions of the American Bronchoscopic Society Chicago
- Tr Am Climat & Clin A — Transactions of the American Climatological and Clinical Association Philadelphia
- Tr Am Dermat A — Transactions of the American Dermatological Association
- Tr Am Orthop A — Transactions of the American Orthopedic Association Philadelphia
- Tr Am Pediat Soc — Transactions of the American Pediatric Society Chicago [Ceased publication]
- Tr Am Proct Soc — Transactions of the American Proctologic Society New York
- Tr Clin Soc London — Transactions of the Clinical Society of London [Continued in Proc Roy Soc Med]
- Tr Illum Engin Soc. — Transactions of the Illuminating Engineering Society Easton Pa
- Tr M Soc New York — Transactions of the Medical Society of the State of New York
- Tr New York M A — Transactions of the New York State Medical Association
- Tr Ophth Soc Australia — Transactions of the Ophthalmological Society of Australia (British Medical Association) Sydney
- \*Tr Pacific Coast Soc Obst & Gynee — Transactions of the Pacific Coast Society of Obstetrics and Gynecology Western Journal of Surgery Publishing Co Portland Ore
- Tr Path Soc London — Transactions of the Pathological Society of London [Continued in Proc Roy Soc Med]
- Tr Roy Canad Inst — Transactions of the Royal Canadian Institute Toronto
- Tr Roy Soc Edinburgh — Transactions of the Royal Society of Edinburgh
- Tr Sect Dermat & Syph, A M A — Transactions of the Section on Dermatology and Syphilology of the American Medical Association Chicago [Ceased publication]
- Tr Sect Laryng, Otol & Rhin, A M A — Transactions of the Section on Laryngology, Otolology and Rhinology American Medical Association Chicago [Ceased publication]
- Tr Sect Obst, Gynee & Abd Surg, A M A — Transactions of the Section on Obstetrics, Gynecology and Abdominal Surgery of the American Medical Association Chicago [Ceased publication]
- Tr Sect Pediat, A M A — Transactions of the Section on Pediatrics American Medical Association Chicago [Ceased publication]
- Tr Sect Practice Med, A M A — Transactions of the Section on Practice of Medicine of the American Medical Association Chicago [Ceased publication]
- Tr Sect Surg, Gen & Abd, A M A — Transactions of the Section on Surgery General and Abdominal of the American Medical Association Chicago [Ceased publication]
- Tr Sect Urol, A M A — Transactions of the Section on Urology of the American Medical Association Chicago [Ceased publication]
- Tr South Surg & Gynee A — Transactions of the Southern Surgical and Gynecological Association
- \*Trab Inst Cajal invest biol — Trabajos del Instituto Cajal de investigaciones biológicas Madrid
- Trav du lab d recherches biol de l'Univ de Madrid — Travaux du laboratoire des recherches biologiques de l'Université de Madrid
- Tribuna med — Tribuna medica Rio de Janeiro Brazil
- Tribune méd — Tribune médicale Paris
- Tribune méd, Am ed — Tribune médicale American edition New York [Continued as M Tribune]

- Tri-State M J —Tri-State Medical Journal Shreveport La [Ceased publication]
- Umbria med —Umbria medica rivista di medicina e scienze Terni Italy
- Ungar med Presse —Ungarische medizinische Presse Budapest
- Univ California Publ Pub Health —University of California Publications in Public Health Berkeley
- Univ M Mag —University Medical Magazine Philadelphia [Continued as Univ Pennsylvania M Bull]
- Univ Pennsylvania M Bull —University of Pennsylvania Medical Bulletin Philadelphia
- Univ Toronto M J —University of Toronto Medical Journal
- \*Urologia —Urologia Organo ufficiale della Società italiana di urologia Via Paris Bordone 1, Treviso, Italia
- Verhandel d k Akad v Wetensch —Verhandelingen der koninklijke Akademie van Wetenschappen Amsterdam
- Verhandl d deutsch Gesellsch f Chir —Verhandlungen der deutschen Gesellschaft für Chirurgie Berlin
- Verhandl d deutsch Kong f inn Med —Verhandlungen des deutschen Kongresses für innere Medizin Wiesbaden Germany
- Verhandl d deutsch path Gesellsch —Verhandlungen der deutschen pathologischen Gesellschaft Jena, Germany
- Verhandl d Kong f inn Med —Verhandlungen des Kongresses für innere Medizin Wiesbaden, Germany [Continued as Verhandl d deutsch Kong f inn Med]
- Verhandl d Ver f inn Med zu Berlin —Verhandlungen des Vereins für innere Medizin zu Berlin
- Vermont M Monthly —Vermont Medical Monthly Burlington
- Vermont Med —Vermont Medicine Rutland
- Vestnik rentgen i radiol —Vestnik rentgenologii i radiologii Leningrad
- Vestnik ushn ,gorl i nos bol —Vestnik ushnikh gorlovikh i nosovikh bol eznei (Courier of Diseases of the Ear Throat and Nose) Leningrad
- \*Vida med —Vida médica Rua Barão de Itambi 31 Rio de Janeiro
- Virginia Clin Rec —Virginia Clinical Record Richmond
- Virginia M Semi-Monthly —Virginia Medical Semi Monthly Richmond
- \*Vitamins & Hormones —Vitamins and Hormones Advances in Research and Applications Academic Press Inc 125 E 23rd St New York 10
- Voyenno-med j —Voyenno meditsinski journal Leningrad
- Vrach —Vrach Leningrad
- Vrach gaz —Vrachebnaya gazeta Leningrad
- Vrtljschr f gerichtl Med —Vierteljahresschrift für gerichtliche Medizin und öffentliches Sanitätswesen Berlin
- Vrtljschr f d prakt Heilk —Vierteljahresschrift für die praktische Heilkunde Prague Czechoslovakia
- Vrtljschr f prakt Pharm —Vierteljahresschrift für praktische Pharmacie Berlin
- War Med —War Medicine Chicago 10 [Ceased publication]
- Washington M Ann —Washington Medical Annals Washington D C
- Wchenschrift für Therapie und Hygiene des
- Journal Lagos [Ceased publication]
- West Canada M J —Western Canada Medical Journal Winnipeg
- West Druggist —Western Druggist Chicago

- West London M.J. —West London Medical Journal
- West J Surg —Western Journal of Surgery Obstetrics and Gynecology Portland, Ore
- West M News —Western Medical News Regina Canada
- West M Rev —Western Medical Review Lincoln Omaha Neb
- West M Times —Western Medical Times Denver Colo
- Wien klin Rundschau —Wiener klinische Rundschau Vienna
- Wien med Bl —Wiener medizinische Blätter Vienna
- Wien med Presse —Wiener medizinische Presse Vienna
- Woman's M.J. —Woman's Medical Journal Toledo Ohio
- Women in Med —Women in Medicine [Ceased publication]
- \*Yale Rev —The Yale Review Drawer 1729 New Haven Conn
- Zahnärztl Rundschau —Zahnärztliche Rundschau Berlin
- Zentralbl. —See also Centralbl
- Zentralbl f allg Path u path Anat —Zentralblatt für allgemeine Pathologie und pathologische Anatomie Jena Germany
- Zentralbl f d ges Chir u Grenzgeb —Zentralblatt für die gesamte Chirurgie und ihre Grenzgebiete Berlin
- Zentralbl f d ges Gynaek u Geburtsh —Zentralblatt für die gesamte Gynaekologie und Geburtshilfe sowie deren Grenzgebiete Berlin
- Zentralbl f d ges inn Med u d Grenzgeb —Zentralblatt für die gesamte innere Medizin und deren Grenzgebiete Berlin
- Zentralbl f d ges Physiol u Path d Stoffwechs —Zentralblatt für die gesamte Physiologie und Pathologie des Stoffwechsels mit Einschluss der experimentellen Therapie Berlin Vienna
- Zentralbl f Nervenhe u Psychiat —Zentralblatt für Nervenheilkunde und Psychiatrie Coblenz Germany Leipzig
- Zentralbl f Physiol —Zentralblatt für Physiologie Leipzig Vienna
- Zentralbl f Röntgenstrahlen —Zentralblatt für Röntgenstrahlen Radium und verwandte Gebiete Wiesbaden Germany
- \*Zoologica —Zoologica Scientific Contributions of the New York Zoological Society 630 Fifth Ave New York 20
- Ztschr f allg Physiol —Zeitschrift für allgemeine Physiologie Jena Germany
- Ztschr f anal Chem —Zeitschrift für analytische Chemie Wiesbaden Germany
- Ztschr f ang Anat —Zeitschrift für angewandte Anatomie und Konstitutionslehre Berlin
- Ztschr f ang Psychol —Zeitschrift für angewandte Psychologie und psychologische Sammelersuchung Leipzig
- Ztschr f Balneol, Klimat —Zeitschrift für Balneologie Klimatologie und Kurort Hygiene Berlin
- Ztschr f Bekämpfung d Geschlechtskr —Zeitschrift für Bekämpfung der Geschlechtskrankheiten Leipzig
- Ztschr f Chemotherapie —Zeitschrift für Chemotherapie und verwandte Gebiete Leipzig
- Ztschr f exper Path u Therap —Zeitschrift für experimentelle Pathologie und Therapie Berlin
- Ztschr f gerichtl Med —Zeitschrift für gerichtliche Medizin öffentliche Gesundheitspflege und Medicinalgesetzgebung Vienna [Merged in Allg Wien med Ztg]
- Ztschr f Gesundheitsverwalt u Gesundheitsfurs —Zeitschrift für Gesundheitsverwaltung und Gesundheitsfürsorge Berlin [Ceased publication]
- Ztschr f Gewerbe-Hyg —Zeitschrift für Gewerbe-Hygiene Vienna

- Zschr f Heilk* —Zeitschrift für Heilkunde Berlin Vienna
- Zschr f Laryng, Rhin* —Zeitschrift für Laryngologie Rhinologie und ihre Grenzgebiete Leipzig
- Zschr f Ohrenh* —Zeitschrift für Ohrenheilkunde Wiesbaden Germany
- Zschr f pädagog Psychol* —Zeitschrift für pädagogische Psychologie experimentelle Pädagogik und jugendkundliche Forschung Leipzig
- Zschr f Pathopsychol* —Zeitschrift für Pathopsychologie Leipzig
- Zschr f Pflanzenkr* —Zeitschrift für Pflanzenkrankheiten Stuttgart Germany
- Zschr f phys u diätet. Therap* —Zeitschrift für physikalische und diätetische Therapie Leipzig
- Zschr f Psychotherap u med Psychol* —Zeitschrift für Psychotherapie und medizinische Psychologie Stuttgart Germany
- Zschr f rat Med* —Zeitschrift für rationelle Medizin Zurich Switzerland
- Zschr f Säuglings- u Kleinkinderschutz* —Zeitschrift für Säuglings- und Kleinkinderschutz Berlin
- Zschr f Sexualwissensch* —Zeitschrift für Sexualwissenschaft und Sexualpolitik Berlin
- Zschr f soziale Med* —Zeitschrift für soziale Medizin Medizinalstatistik Arbeiterversicherung soziale Hygiene und die Grenzfragen der Medizin und Volkswirtschaft Leipzig
- Zschr f Tiermed* —Zeitschrift für Tiermedizin Jena Germany
- Zschr f Tuberk* —Zeitschrift für Tuberkulose Leipzig
- Zschr f Tuberk u Heilstättenw* —Zeitschrift für Tuberkulose und Heilstättenwesen Leipzig [Continued as *Zschr f Tuberk*]
- Zschr f Untersuch d Nahrungs- u Genussmittel* —Zeitschrift für Untersuchung der Nahrungs- und Genussmittel sowie der Gebrauchsgegenstände Berlin





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Page numbers set in **boldface** refer to illustrations

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